eahp
european association
of hospital pharmacists

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#EAHP2025

29TH EAHP CONGRESS
12-13-14 MARCH

COPENHAGEN 2025

- CONGRESS PROGRAMME
- SESSION ABSTRACTS
- SYNERGY SATELLITE
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...AND MORE

PERSON CENTRED PHARMACY - NAVIGATING DIGITAL HEALTH

PROGRAMME BOOK

EAHP thanks the continued support of Gold Partner ***Omnicell***

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29TH CONGRESS OF THE EAHP – LEADERSHIP & STAFF

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James Evans, *Policy Officer*

GENERAL INFORMATION

CONGRESS SECRETARIAT AND REGISTRATION DESK*

OPENING HOURS

Tuesday 11 March, from 12.00 to 17.00
Wednesday 12 March, from 07.00 to 17.00
Thursday 13 March, from 08.00 to 17.00
Friday 14 March, from 08.00 to 11.00

* (individuals, groups and exhibitors' registrations)

COFFEE BREAKS AND LUNCHES

Coffee breaks will be served on Wednesday 10.15 to 12.00 and 16:30 to 17:30, on Thursday 16.30 to 17:00 and on Friday 10:30 to 11:30. Lunches will be available free of charge for all participants during the official congress days and will be served in the **Exhibition Hall** (Hall D) from 13.30 to 14.30 on Wednesday and from 13.30 to 15.00 on Thursday.

ADMISSION TO SESSIONS

Additional tickets are not needed to attend sessions. The doors will be closed to the sessions on time and will re-open 10 minutes after the session begins for latecomers. Please note that entrance to sessions will not be permitted within the last 30 minutes of each session. Name badges will be scanned as participants exit the room at the end of each session. Badges must be scanned in order to obtain continuing education points. No exception will be made.

Please note that badge switching/sharing during the event is strictly prohibited and will subject badges to confiscation by security. We thank you for your cooperation.

POSTER SESSIONS

The deadline to deliver and hang your poster is **Wednesday, 12 March from 10.15 to 17.00**. Please note that there will be no access to the poster area to hang your posters before the indicated time. Please go to the poster area and check-in with the hostesses on duty to find out where and how to hang your poster.
The posters will be displayed in Hall D for the duration of the congress. **Presenters are expected to be present at their poster during 2 coffee breaks (Thursday, 13 March from 10.30 to 11.00 and 16.30 to 17.00), and Friday, 14 March from 10.30 to 11.30**). The presence of at least one of the poster authors is mandatory.
Abstract and GPIs Award Nominees' oral presentations will take place on **Wednesday, 12 March from 10.30 to 12.00 in Auditorium 10 (Abstracts) and Auditorium 11 (GPIs)**, and the winners announced at the closing ceremony on **Friday, 14 March from 11.30 to 13.00**. Authors must be present during the closing ceremony to win the prize.

Posters can be removed on Friday,14 March between 13.00 and 14.00. Posters not removed after the dismantling deadline will be removed and discarded.

EXHIBITION

NOTE: Doors to the exhibition hall will have security as entry is not permitted until Wednesday 12 March at 10.15.

Opening hours
Wednesday, 12 March from 10.15 to 20.00
Thursday, 13 March from 09.00 to 17.00
Friday, 14 March from 09.00 to 12.00

CLOAKROOM
The cloakroom is located at the main entrance, next to the Registration Desks and will be available for use each day, free of charge. The cloakroom hours are as follows:

Wednesday, 12 March from 07.00 to 20.00
Thursday, 13 March from 08.00 to 17.00
Friday, 14 March from 08.00 to 13.30

WIFI ACCESS
Free WiFi service will be available throughout the congress centre. The **WiFi network name is EAHP2025**, and **no password needed**.

NEAREST PHARMACY
Pharmacie Sønderbro
Amagerbrogade 158
2300 København
Monday to Saturday from 06.00 am to 12.00 am.
Tel: +45 32 58 01 40 https://www.dinapoteker.dk/a/soenderbro

CONGRESS FIRST AID NUMBER
Tel: +45 3247 2420

EMERGENCY NUMBERS
European Emergency: 112
Ambulance service: 112
Fire brigade: 114

SYNERGY SATELLITE EVENT

THE EAHP INVITES YOU TO ATTEND THE 2025 SYNERGY SATELLITE SESSION:

eahp synergy

PITCH PERFECT HEALTHCARE PRESENTATION SKILLS

29th CONGRESS OF THE EAHP

12|03|25 part I 12:00 to 13:00
13|03|25 part II 8:00 to 9:00
HALL A1 Bella Center Copenhagen

Sponsored by an educational grant from Baxter

A specialised **two-part workshop** tailored for healthcare professionals and **designed to enhance the presentation skills** necessary for PhD defense, research talks and professional congresses.

The initial session focuses on **fundamental public speaking techniques** to help researchers effectively introduce their studies, maintain clarity throughout their exposition, and conclude with compelling takeaways that resonate with academic and clinical audiences.

In the subsequent session, participants will delve into **advanced presentation skills**, applying these to their research presentations. This includes the proficient use of slides and visual aids, best practices for data presentation, and tips for eliminating redundancies to enhance the authority and clarity of the talk. Participants will also learn to manage public speaking anxiety, use body language effectively, and employ storytelling to make their research memorable and engaging.

SPEAKER SIMON HALL FACILITATOR SONJA GUNTSCHNIG

DESIGN > www.biographia.it

CONTACT US | synergy@eahp.eu

The European Association of Hospital Pharmacists (EAHP) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education

The EAHP 2025 Congress is accredited by the European Council for Pharmacy Education Accreditation (ECPhA). ECPhA applies high quality standards in the assessment of available educational programmes.

FOREWORD BY THE PRESIDENT

Dear Colleagues

I am thrilled to welcome you to the 29th edition of the EAHP Congress taking place in Copenhagen, Denmark, between 12-14 March 2025.

Hospital pharmacists around Europe will again have the opportunity to share their expertise and latest developments in practice to advance patient outcomes through learning and nurturing partnerships and networks.

Our congress will bring us all closer to change, progress and evaluation of what we deliver today to patients seeking pharmaceutical care across European hospitals and healthcare systems in complex digital infrastructures. Moreover, the congress takes place in times of a generational reform of pharmaceutical legislation, marking the beginning of different approaches towards digital environment where patient-centered and seamless care interlinks, while securing safe healthcare delivery and optimizing health outcomes.

As healthcare professionals, we are not only obliged to change and evolve our practice, but to monitor the current and future hospital pharmacy policy and legislation landscape which gives us the opportunity to drive change thereby allowing us to continue our numerous activities dedicated and focused on patients. Having said that, we are fully aware of challenges that we as healthcare providers are facing in times of poly-crisis, shortages of medicines and medical devices and finally workforce shortages. Although in every one of EAHP's 36 member and 4 associate member countries, hospital pharmacists experience different obstacles while following the patients throughout the healthcare system, the EAHP congress shows, that hospital pharmacists stay united and will continue to improve pharmaceutical care towards the ultimate goal of providing the best possible treatment for patients, based on efficient and high quality servic es and by leveraging previously gained decades of experience.

Welcome to Copenhagen, where friends of EAHP will keep spreading the word of hospital pharmacy among patients and healthcare professionals across Europe and beyond.

Dr. Nenad Miljković
EAHP President

ABOUT EAHP

The **European Association of Hospital Pharmacists** represents more than 29.000 hospital pharmacists in 36 European countries and is the only association of national organisations representing hospital pharmacists at European and international levels. In addition, EAHP has 2 associate members from outside the Council of Europe.

HOW HAS THE EAHP DEVELOPED?

At a scientific congress in Strasbourg a number of hospital pharmacists from different European countries decided that they should establish a new European association to represent their common interests. Thus in 1969, the seeds of EAHP were sown. On 6 March 1972, the representatives of six European countries signed the first Statutes of the European Association of Hospital Pharmacists, in The Hague, The Netherlands. The first President of EAHP was Marcel Lebas from France.

The first member countries were Belgium, Britain, Denmark, France, the Federal Republic of Germany and The Netherlands. In 1973, Ireland and Spain joined EAHP, soon followed by Norway, Greece, Austria, Sweden and Switzerland. In the 1990s, Italy, Portugal, Hungary, Luxembourg, Finland, Slovakia, Slovenia, Croatia and the Czech Republic became members. Estonia, Latvia, Lithuania, Poland, Serbia, Turkey, North Macedonia, Bulgaria and Bosnia Herzegovina followed. In 2012, Iceland joined the association, followed by Malta and Romania in 2013 and Montenegro in 2016. More recently, Cyprus became a member of EAHP.

Full Membership in EAHP is open to national associations from countries which are members of the Council of Europe. Associate Membership was approved in 2020 and members include Algeria and Uruguay.

On the 1st of August 2011, the EAHP officially became an International Not-for-Profit Organization, and adjusted its policy to better face modern challenges.

EAHP MISSION

EAHP represents and develops the hospital pharmacy profession within Europe in order to ensure the continuous improvement of care and outcomes for patients in the hospital setting. This is achieved through science, research, education, practice, as well as sharing best-practice and responsibility with other healthcare professionals.

WHAT ARE THE GOALS OF THE EAHP?

- In the interest of patients and public health, to promote and further develop hospital pharmacy and to obtain and maintain general joint pharmaceutical principles and a joint pharmaceutical policy;
- to foster research and education activities on behalf of hospital pharmacy, in order to allow hospital pharmacists in all countries which are members of the Council of Europe from time to time (hereinafter "Countries in the European Region") to contribute optimally to public health and furthermore anything directly or indirectly related or beneficial thereto, all in the broadest sense of the word;

- to promote cooperation with other organisations in the domain of public health;
- to promote the position and function of hospital pharmacists;
- to support and uphold the interests of hospital pharmacists at the European Union authorities;
- to support and uphold the interests of hospital pharmacists at the Council of Europe authorities;
- to support and undergo everything related to the above that may be conducive to carrying out the Association's purpose.

EAHP SCIENTIFIC COMMITTEE – EDUCATIONAL MISSION

The European Association of Hospital Pharmacists is committed to providing educational innovation and training of hospital pharmacists to a level of specialisation and maintain continuing professional development (CPD). We will facilitate and enhance the professional growth of European hospital pharmacists and develop hospital pharmacy in order to promote the best and safest use of medicines and medical devices for the benefit of patients in Europe.

EAHP SCIENTIFIC COMMITTEE – EDUCATIONAL GOALS

- To identify the educational needs of EAHP members and prepare educational programmes to meet those needs;
- to provide knowledge and application based educational programmes to assist pharmacists who practice in hospitals meet their patient care responsibilities and expand their professional roles and goals;
- to share best practice, innovation and educational programmes that can be applied to daily practice;
- to promote hospital pharmacy practice research.

*EAHP defines Continuing Pharmacy Education (CPE) as per the ACPE definition which states that "Continuing education for the profession of pharmacy is a structured educational activity designed or intended to support the continuing development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Continuing pharmacy education (CPE) should promote problem-solving and critical thinking and be applicable to the practice of pharmacy."

All EAHP educational activities are also accredited by the European Council for Pharmacy Education Accreditation (ECPhA). ECPhA's aims ECPhA aims at improving the quality of continuing education in pharmacy practiced in healthcare settings across Europe via accrediting live and online lifelong learning events throughout collaborating with national healthcare professional associations and accrediting bodies.

STRUCTURE OF THE EAHP

The prime governing body is the General Assembly, which meets annually and elects the Board of the Association. The General Assembly is a delegate conference at which each member state may have up to three delegates. Every delegation has one vote regardless of size.

The Board of Directors is the Executive Body of the Association and is elected for a three-year term of office, with the possibility to be re-elected. The responsibility for the core activities of the association are shared between the different directors. The Board normally meets four times a year in addition to meetings during the Congress and the General Assembly.

The Board carries out the policies agreed at the General Assembly, and designs and coordinates the implementation of the strategic goals of the association, with the support of the EAHP staff. In addition, the Board is closely involved in the control of the official journal of the Association, European Journal of Hospital Pharmacy (EJHP). The Board is also closely involved in the organisation of the annual EAHP Congress of Hospital Pharmacy, with one director chairing the congress organising committee and another chairing the scientific committee.

Every year, at the General Assembly, the Director of Finances discloses all the expenses and revenues and explains them in detail. Members would have had the opportunity to study them before the General Assembly meeting as they receive the files at least 6 weeks prior the General Assembly meeting.

EAHP is funded by:

- membership dues
- revenues generated by the yearly congress
- advertising revenue related to the annual congress
- gifts
- educational grants
- subsidies and donations
- all other income legally obtained.

All accounts are audited both by EAHP auditors, appointed by the General Assembly and external auditors.

Click HERE to view the **EAHP Statutes**.

Click HERE to view the **EAHP Code of Conduct**.

EAHP PARTNERS WITH CLIMATECARE

EAHP join forces with climate and sustainable development experts from ClimateCare to offset the carbon emissions associated with the air travel of the Association's Board members to and from Board meetings. Through projects which tackle global climate change.

By offsetting emissions through ClimateCare, EAHP is supporting projects that make a measurable difference to people's lives. The LifeStraw Carbon For Water project relies on finance from offsetting to deliver safe water to 4 million people in Kenya. It was the first project to link water provision with carbon credits at scale and has been recognised by the United Nations. The Gyapa Stoves project supports local entrepreneurs to manufacture and distribute safe, efficient cookstoves to households in Ghana. Run on the ground by our partners Relief International, the Gyapa Stove cuts charcoal use by up to 50%, saving families money and reducing harmful smoke emissions.

IMPLEMENTATION OF THE EUROPEAN STATEMENTS OF HOSPITAL PHARMACY

WHAT ARE THE EUROPEAN STATEMENTS OF HOSPITAL PHARMACY?

The European Statements of Hospital Pharmacy were formulated following an 18-month review process, which included two rounds of online Delphi consultations with EAHP's member associations and an equal number of patient and other healthcare professional organisations. Final agreement on the wording of the statements was reached at a European Summit on Hospital Pharmacy, held in Brussels in May 2014. Only those Statements where there was a high level of agreement between patient groups, doctors, nurses, and pharma- cists were accepted.

The primary purpose of the statements is to provide safer and more effective care where medicines are used in European hospitals. The Statements can also be used as a guide for safer and more effective use of medical devices as well, with the responsibility for medical devices being with Hospital Pharmacies in several of our member countries. The European Statements reflect the importance of the hospital pharmacist as a key stakeholder within the hospital teams for providing optimal and safe patient care. Therefore, the European Statements reflect what we believe every European health system should be aiming for when delivering hospital pharmacy services.

The Statements are divided into 6 different sections:

- **Section 1 – Introductory Statements and Governance**
- **Section 2 – Selection, Procurement and Distribution**
- **Section 3 – Production and Compounding**
- **Section 4 – Clinical Pharmacy Services**
- **Section 5 – Patient Safety and Quality Assurance**
- **Section 6 – Education and Research**

ADOPTION OF A COMMENTED VERSION OF THE STATEMENTS

In 2020, a review was conducted to assess the continued relevance of the Statements and that they effectively covered emerging issues. It was found that the document has remained remarkably resilient and a decision was made that the wording of the statements would not be changed, thereby staying true to the scientific principles used to develop and finalise them. What was agreed though, is that a small number of Statements would benefit from the addition of comments to further clarify their meaning .

The final version of the commented version of the Statements was approved by the EAHP General Assembly. The below are the Statements where comments were added:

S 1.6 "Hospital pharmacists should take the lead in coordinating the activities of multidisciplinary, organisation-wide Drug & Therapeutics Committees or equivalent. They should have appropriate representation as full members of these Committees which should oversee and improve all medicines management policies".

COMMENT – *Hospital management, taking account of national guidelines, determines what structures are in place to assure the efficacy, safety and cost-effective use of mediciness.*

S 2.2 "Hospital pharmacists should take the lead in developing, monitoring, reviewing and improving medicine use processes and the use of medicine related technologies. Responsibility for using these processes may rest with other health care professionals and may vary according to the medicine, the medicine related technology, the health care setting and the multidisciplinary team delivering care"

COMMENT – *Hospital pharmacists have a key role, working with others, in ensuring continuous quality improvement for medicines use processes, including where information technology is utilised.*

S 3.5 "Hazardous medicines should be prepared under appropriate conditions to minimise the risk of contaminating the product and exposing hospital personnel, patients and the environment to harm"

COMMENT – *To achieve this there will need to be a multidisciplinary risk assessment of the hazardous medicines to determine where and how it is best pre- pared.*

S 3.6 "When the reconstitution or mixing of medicines takes place in a patient care area, a hospital pharmacist should approve written procedures that ensure staff involved in these procedures are appropriately trained"

COMMENT – *Among healthcare professionals the hospital pharmacist is in the best position, because of their expertise in formulation, to advise on reconstitution or mixing of medicines. It is critical that any healthcare professional undertaking these tasks is competent.*

S 5.1 "The "seven rights" (the right patient, right medicine, right dose, right route, right time, right information and right documentation) should be fulfilled in all medicines related activities in the hospital"

COMMENT – *This is not an exhaustive list of 'rights' and with the increase in use of personalised medicines the 'right patient' has an additional meaning beyond just identification of the individual, it is also now whether the medicine is genetically appropriate for that individual patient*

EAHP's Policy and Advocacy

2025 SHORTAGES SURVEY

EAHP is committed to continuing its investigation and reporting on shortages of medicines and medical devices across Europe. EAHP seeks insights not only from hospital pharmacists but also from patients and other healthcare professionals working in hospital settings. The goal is to address the issue at the European level and incorporate preventive measures into ongoing and future legislative initiatives.

To this end, **EAHP is launching its 2025 Shortages Survey**, that has been refined to gather more precise data on medical device shortages. Additionally, new questions have been introduced to explore the role of compounding in managing medicine shortages and the use of national and European lists of critical medicines.

Hospital staff and patients who have experienced medicine shortages during their hospital stay are encouraged to provide feedback.

You can answer to the Survey HERE.

EAHP SELF-ASSESSMENT TOOL

The EAHP Self-assessment tool allows hospital pharmacists to assess the level of implementation of the European Statements within their hospitals while providing tailored actions plans. EAHP is kindly asking all hospital pharmacies in Europe to assess their hospitals with the self-assessment tool to help us better understand gaps on implementation within Europe.

You can access the tool here: https://sat.eahp.eu/en/home

STATEMENT IMPLEMENTATION LEARNING COLLABORATIVE CENTER (SILCC) PROGRAMME

EAHP launched in 2018 the Statement Implementation Learning Collaborative programme (SILCC) as part of its Statement Implementation project. The SILCC programme will allows hospital pharmacists (SILCC Fellows) to visit hospitals (SILCC hosts) from other EAHP member countries to learn about pharmacy procedures linked to the European Statements of Hospital Pharmacy. The EAHP Implementation team has developed this programme with the help of the EAHP Board, its national associations and the national implementation ambassadors.

EAHP also provides a small grant for SILCC Fellows but the seats are limited so apply now! Visit https://statements.eahp.eu/statement-implementation-learning-collaborative-centres-silcc to learn more or stop by the EAHP Booth #9 at the exhibition area to check with the EAHP team !

HOSPITAL PHARMACY DAY (MARCH 27)

Join us on March 27th to celebrate Hospital Pharmacy Day. This date wants to celebrates pharmacists and all professionals working on a Hospital Pharmacy around the world. Stop by the EAHP or visit the EAHP website to learn more about how you can join this initiative!

HOSPITAL PHARMACY DAY

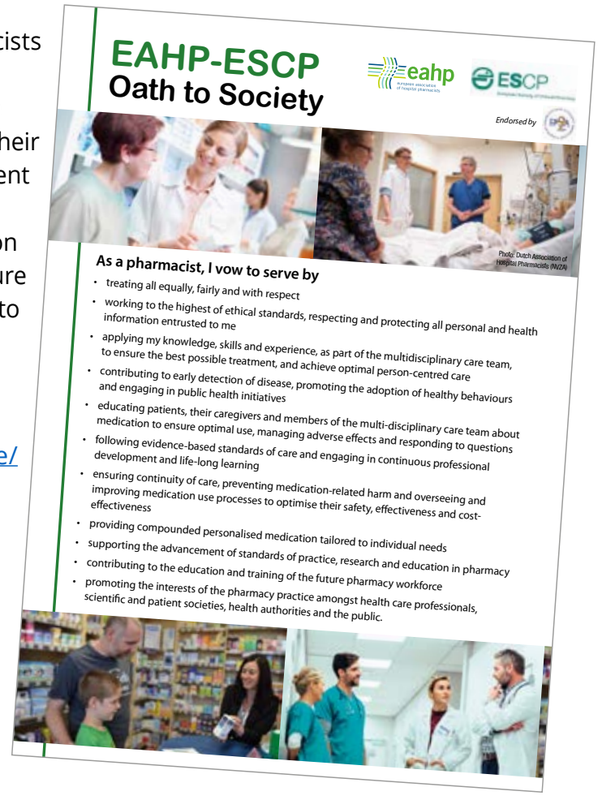
OATH TO SOCIETY

The European Association of Hospital Pharmacists (EAHP) and the European Society of Clinical Pharmacy (ESCP) have collaboratively developed the "Oath to Society" that acts as a contract for excellence in providing compassionate patient care, working as part of the healthcare team and advancing the pharmacy profession, and showcasing how clinical and hospital pharmacists work every day.

The Oath to Society is the promise that the members of EAHP and ESCP make to patients and the public they serve, the healthcare professionals they interact with and the health systems they work in.

The Oath functions as a compass for pharmacists to adhere to the highest standards of ethics, integrity and professionalism, as they provide service to the community over the course of their careers. Touching on trust and respect, different aspects of the patient care pathway, the multidisciplinary care team, disease prevention and health promotion, education and the future development of pharmacy practice, the Oath to Society is all-encompassing.

The Oaths to Society was translated to 20 different languages and can be found here: https://eahp.eu/hospital-pharmacy-practice/oathtosociety/


EAHP-ESCP
Oath to Society

Endorsed by

As a pharmacist, I vow to serve by

- treating all equally, fairly and with respect
- working to the highest of ethical standards, respecting and protecting all personal and health information entrusted to me
- applying my knowledge, skills and experience, as part of the multidisciplinary care team, to ensure the best possible treatment, and achieve optimal person-centred care
- contributing to early detection of disease, promoting the adoption of healthy behaviours and engaging in public health initiatives
- educating patients, their caregivers and members of the multi-disciplinary care team about medication to ensure optimal use, managing adverse effects and responding to questions
- following evidence-based standards of care and engaging in continuous professional development and life-long learning
- ensuring continuity of care, preventing medication-related harm and overseeing and improving medication use processes to optimise their safety, effectiveness and cost-effectiveness
- providing compounded personalised medication tailored to individual needs
- supporting the advancement of standards of practice, research and education in pharmacy
- contributing to the education and training of the future pharmacy workforce
- promoting the interests of the pharmacy practice amongst health care professionals, scientific and patient societies, health authorities and the public.

implementation of the european statements of hospital pharmacy

right for the patient, right for the profession

EAHP POLICY PRIORITIES

PROFESSIONAL DEVELOPMENT
Fostering the continuous development and education of hospital pharmacists

COMMON TRAINING FRAMEWORK
Creating a Common Training Framework and enabling the implementation of a common competency framework for hospital pharmacy in Europe

ACTIONS AGAINST MEDICINES SHORTAGES
Securing European level action on the global health threat of medicines shortages

COMBATTING INFECTIONS
Leveraging the role of the hospital pharmacist in combatting infectious diseases and actively participating in vaccination programmes

EQUAL ACCESS FOR PATIENTS
Providing equal and timely access for all patients, including those with rare conditions and unmet needs, to all relevant medicinal therapies

ENSURING SAFE THERAPIES
Ensuring safe and appropriate use of medicinal therapies

DIGITALISATION IN MEDICATION PROCESSES
Facilitating the proper adoption, implementation and usage of digital technologies, including automation and robotics

FUTURE-PROOFING THE WORKFORCE
Addressing the changing roles and resilience of the hospital pharmacy workforce in response to demographic challenges

CALL FOR ABSTRACTS – 2026 BARCELONA

30th EAHP CONGRESS
BARCELONA
18-19-20 MARCH 2026

DIVERSE TASKS · ONE TEAM
ensuring excellence for all patients

ABSTRACT SUBMISSION OPENS 1ST AUGUST 2025!

Original contributions from all fields of hospital pharmacy are encouraged and welcomed for poster presentation.

DEADLINE FOR SUBMISSION: 1ST OCTOBER 2025

During the review process, the award nominees will be selected, and the presenting author of the nominated abstracts will be invited to give an oral presentation after which the final judging will take place.

Please be sure to provide an email address which will not be blocked by spam servers so that EAHP may notify you for modifications and nominations.

(Abstracts may be submitted through the EAHP website's online submission page.)

IMPORTANT NOTE: The online submission form does not recognise some symbols from certain keyboards. Therefore, please proof your abstract after it has been entered into the system and before your final submission.

Please visit the EAHP website at http://www.eahp.eu to view the guidelines and to submit abstracts for the Congress 2026.

Abstracts must be entered into the system by section according to the guidelines.
There will be 5 sections: Background – Purpose – Material and methods – Results – Conclusion
All abstracts must be linked to the European Statements on Hospital Pharmacy:

Section 1: **Introductory Statements and Governance**
Section 2: **Selection, Procurement and Distribution**
Section 3: **Production and Compounding**
Section 4: **Clinical Pharmacy Service**s
Section 5: **Patient Safety and Quality Assurance**
Section 6: **Education and Research**

INFORMATION ABOUT ACCREDITATIONS (ACPE and ECPhA)

The European Association of Hospital Pharmacists (EAHP) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

ACPE is the American agency for accreditation of professional degree programmes in pharmacy and providers of continuing pharmacy education, including certificate programmes in pharmacy. Accreditation is the public recognition granted to a professional degree programme in pharmacy or a provider of continuing pharmacy education, including certificate programmes in pharmacy that is judged to meet standards through periodic evaluations.

Note that only seminars and keynote presentations are accredited. Click on the ACPE logo to visit the website of the Accreditation Council for Pharmacy Education.

How can participants receive their ACPE certificates?

To receive your ACPE accreditation points, what you have learnt during this session will be assessed. At the beginning of their presentations, each presenter will ask 3 questions that will be answered in the content of their presentations. After the congress, you will receive an evaluation with the same questions, and this is when you will need to answer these questions to receive your accreditation certificates.

Please note that the ACPE certificate will not be sent automatically, but upon request only. EAHP will send you the certificate within 15 days after receiving your request.

More information on how to access the evaluation forms will be sent soon.

For licensed pharmacists and pharmacy technicians for the USA

ACPE and the National Association of Boards of Pharmacy (NABP) are developing a continuing pharmacy education (CPE) tracking service, CPE Monitor, that will authenticate and store data for completed CPE units received by US-licensed pharmacists and pharmacy technicians from ACPE-accredited providers as the EAHP. This service will be particularly helpful to the growing number of pharmacists who are licensed in multiple states, and thus may need to meet the varied CPE requirements of different state boards of pharmacy. The CPE tracking system will create a direct link for sending CPE data from the EAHP to ACPE and then to NABP, ensuring that all reported CPE units are officially verified by the EAHP. To view and track these credits, you must first set up an NABP e-Profile (www.nabp.net), obtain your NABP e-Profile ID, and register for CPE Monitor..

So, for each licensed pharmacist from the United States of America who attends the congress, their NABP e-Profile ID and date of birth are requested to be sent out to congress@eahp.eu, in order to notify NABP and ACPE of the number of CPE units collected by each US participant during the congress in 2022. After CPE units are processed by ACPE and NABP, you will be able to access information about your completed CPE through your NABP e-profile (www.nabp.net).

**AFTER THE CONGRESS YOU WILL RECEIVE AN EVALUATION FORM.
PLEASE FILL IN THE EVALUATION FORMS OF THE SESSIONS YOU ATTENDED IN ORDER TO RECEIVE YOUR CERTIFICATE OF ATTENDANCE.**

Accreditations

Please note that the ACPE certificate will not be sent automatically, but upon request only. EAHP will send you the certificate within 15 days after receiving your request..

2025 EAHP Congress

ACPE Policy and Procedure 4.0
Monitoring Activity Announcements Checklist

Activity Announcements Required Items	CPE Activity A
A. Objectives: verbs must elicit or describe observable or measurable behaviours on the part of participants. (Avoid "understand," "learn," etc.)*	x
B. Type of activity, i.e., knowledge, application, certificate program*	x
C. Target audience(s) that may best benefit from participation in the activity	x
D. Faculty member(s) name, degree, and title/position*	x
E. Fees for the activity	x
F. Schedule of the educational activities	x
G. The amount of CPE credit, specified in contact hours or CEUs	x
H. The official ACPE logo, used in conjunction with the statement identifying the accredited provider sponsoring the activity: • "The [name of accredited provider] is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education" • (Optional: listing the ACPE – accredited or non-accredited co-sponsor – if applicable)	x
I. The ACPE Universal Activity Number assigned to the activity with the appropriate target audience designation ('P' and/or 'T') in the activity UAN	x
J. A full description of all requirements established by the provider for successful completion of the CPE activity and subsequent awarding of credit • (e.g., passing a post-test at specified proficiency level, completing an activity evaluation form, participating in all sessions or certain combinations of sessions that have been designed as a track, etc.)	x
K. Acknowledgment of any organization(s) providing financial support for any component of the educational activity of the CPE activity	x
L. For home study activities: the initial release date and the expiration date	x
M. For Virtual events: Access to System requirements: The Internet browser(s) supported and minimum versions of each required by the learner to complete the online activity; The minimum memory, storage, processor, and internet speeds require by the learner to complete the online activity	x

** Note: for multi-day conferences, the learning objectives may be listed for the overall conference instead of individual activities on the activity announcement. The items with an asterisk must be listed in the final conference program if they are not listed on the activity announcement. If the items are not listed in the respective locations, then the item should be rated as 'Needs Improvement.'*

ECPhA education
EUROPEAN COUNCIL FOR PHARMACY EDUCATION ACCREDITATION

AFTER THE CONGRESS YOU WILL RECEIVE AN EVALUATION FORM. PLEASE FILL IN THE EVALUATION FORMS OF THE SESSIONS YOU ATTENDED IN ORDER TO GET YOUR CERTIFICATE OF ATTENDANCE AND THE ECPHA CREDITS

The European Association of Hospital Pharmacists (EAHP) and the European Society of Clinical Pharmacists (ESCP) founded the European Council for Pharmacy Education Accreditation (ECPhA).

The **European Council for Pharmacy Education Accreditation** (**ECPhA**) is establishing a system for accrediting lifelong learning education in pharmacy. ECPhA's mission is to help improve the quality of continuing education in pharmacy practiced in healthcare settings across Europe via accrediting live and online lifelong learning events throughout collaborating with national healthcare professional associations and national accrediting bodies.

This is being achieved through applying high quality standards in the assessment of available and future continuous professional development and educational programmes, which address the needs and current practice of pharmacists, pharmacy technicians and the pharmacy staff practicing in Europe.

ECPhA is an accreditation provider so the goal of ECPhA is to present an additional layer to the national accreditation systems in the countries where there is one, and not be a substitute of them. A European body, such as ECPhA, will ensure that accreditation of European continued education events is aligned with European practice.

In addition, ECPhA is facilitating the attendance of national education events by participants from other countries by ensuring the transferability of continued education points between countries. ECPhA's accreditation is also open to other countries from outside Europe.

ECPhA applies high quality standards in the assessment of available educational programmes, which address the needs and current practice of pharmacists, pharmacy technicians and the pharmacy staff practicing in Europe and worldwide.

The 29th EAHP Congress will be ACPE and ECPhA accredited. 1 ECPEC (European Continuous Pharmacy Education Credit) = 1 hour of educational activity

The ECPhA Criteria can be found here.

EAHP ACCREDITATION INITIATIVE

The annual EAHP congress is recognised as a valid continuing pharmacy education by the below national association of hospital pharmacists.

ACCREDITATION FOR AUSTRIAN PARTICIPANTS

The Austrian Chamber of Pharmacy will, on request of the Austrian Association of Hospital Pharmacists (www.aahp.at), accredit the 29th EAHP Congress. Austrian pharmacists are therefore eligible to obtain AFPs (Akkreditierte Fortbildungspunkte) for this event. 25 AFPs can be earned for this year's congress.

ACCREDITATION FOR BELGIAN PARTICIPANTS

The Federal Public Service HEALTH, FOOD CHAIN SAFETY AND ENVIRONMENT has accredited the 29th EAHP Congress. Belgian hospital pharmacists are therefore eligible to obtain continuing education points. ECPhA certificate from participation of congress is needed. A total of max 2 points per day (6 in total) in section can be earned.

ACCREDITATION FOR DUTCH PARTICIPANTS

The Annual EAHP Congress is accredited by de NVZA (Dutch Association of Hospital Pharmacists). A certificate of attendance is required to obtain (a maximum of 15) credits. To receive accreditation you can submit your request individually by using your private area on PE-online, and choose ID number: 571059 (EAHP 2025 Kopenhagen) from the "Nascholingsagenda ZA" see PE-online.

ACCREDITATION FOR ESTONIAN PARTICIPANTS

The 29th EAHP Congress is accredited by the Estonian Society of Hospital Pharmacists. Participants have to be present at forthcoming EAHP congress and submit copy of their certificate of participation to ESHP which includes name and all seminars/workshops attended.
1 accreditation point will be given for every 45 minutes of educational event participated. (www.ehas.ee)

ACCREDITATION FOR FRENCH PARTICIPANTS

This EAHP Congress is accredited by the Conseil National Professionnel de la Pharmacie.

ACCREDITATION FOR GERMAN PARTICIPANTS

The German Society of Hospital Pharmacists (ADKA) acknowledges the high level and quality of scientific education provided by the 29th EAHP Annual Congress. Therefore the 29th EAHP Annual Congress is accredited by the German accreditation system of Zertifizierte Fortbildung Klinische Pharmazie der ADKA. ZeFoBi (ADKA) will accept the congress as a continuing education event and will give points on the basis of the ZeFoBi rules. For more information: https://www.adka.de

ACCREDITATION FOR NORWEGIAN PARTICIPANTS

The 29th EAHP Congress has been accredited by the Norwegian Association of Pharmacists for continuing education points. In order to collect their accreditation points Norwegian participants must register their attendance directly on the website www.farmaceutene.no

ACCREDITATION FOR PORTUGUESE PARTICIPANTS

Portugal hospital pharmacists are eligible to obtain continuing education points. Certificate from participation of congress is needed. The credit request can be made individually, in the private area of the Ordem dos Farmacêuticos website, by completing the form and attaching the certificate.
More information: https://www.ordemfarmaceuticos.pt/pt/

ACCREDITATION FOR SLOVAK PARTICIPANTS

The EAHP Annual Congresses have been accredited by the Slovak Chamber of Pharmacists (SLeK) as a continuing education for pharmacists. The Section of Hospital Pharmacists of the Slovak Chamber of Pharmacists acknowledges the high quality of scientific education provided by the EAHP annual congress. Participation will be evaluated according to the SLeK methodology depending on the number of hours spent on specific presentations and seminars within the congress. ACPE and ECPhA certificate of participation to congress is needed to be enclosed.

ACCREDITATION FOR SWISS PARTICIPANTS

The EAHP Congresses are accredited by the FPH Spital. 50 Credit Points per day for hospital and clinical pharmacy.

SCIENTIFIC PROGRAMME

THEME:
PERSON CENTRED PHARMACY – NAVIGATING DIGITAL HEALTH

KEYNOTES

KEYNOTE 1 - Opportunities and limitations of high-tech evolution
ACPE UAN: 0475-0000-25-001-L04-P – A knowledge-based activity
ECPhA UAN: 0.75-ECPEC-EAHP2025-K1 – A knowledge-base activity

KEYNOTE 2 - Navigating the challenges of disinformation in healthcare
ACPE UAN: 0475-0000-25-004-L05-P – A knowledge-based activity
ECPhA UAN: 0.75-ECPEC-EAHP2025-K2 – A knowledge-base activity

KEYNOTE 3 - Digital health – patient experiences and expectations
ACPE UAN: 0475-0000-25-005-L05-P – A knowledge-based activity
ECPhA UAN: 0.75-ECPEC-EAHP2025-K3 – A knowledge-base activity

SECTION 1: INTRODUCTORY STATEMENTS AND GOVERNANCE

IG1 - Cyber-attack, systems down - pharmacy be prepared!
ACPE UAN: 0475-0000-25-006-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-IG1 – A knowledge-base activity

SECTION 2: SELECTION, PROCUREMENT AND DISTRIBUTION

SPD1 - New threats around procurement
ACPE UAN: 0475-0000-25-007-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-SPD1 – A knowledge-base activity

SPD2 - Handling shortages, the EU approach
ACPE UAN: 0475-0000-25-008-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-SPD2 – A knowledge-base activity

INT1 - The European landscape on hospital pharmacy logistics
ACPE UAN: 0475-0000-25-009-L04-P – An application-based activity
ECPhA UAN: 1-ECPEC-2025-INT1 – An application-based activity

SECTION 3: PRODUCTION AND COMPOUNDING

PC1 - Edutainment - using simulation for pharmaceutical technology training
ACPE UAN: 0475-0000-25-010-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-PC1 – A knowledge-base activity

PC2 - Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition
ACPE UAN: 0475-0000-25-011-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-PC2 – A knowledge-base activity

PC3 - Hospital @ Home
ACPE UAN: 0475-0000-25-012-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-PC3 – A knowledge-base activity

PC4 - Which clean room technologies? It depends!
ACPE UAN: 0475-0000-25-013-L07-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-PC4 – A knowledge-base activity

W1 - Aseptic handling in hospital pharmacies - challenges ahead
ACPE UAN: 0475-0000-25-014-L05-P – An application-based activity
ECPhA UAN: 1-ECPEC-2025-W1 – An application-based activity

SECTION 4: CLINICAL PHARMACY SERVICES

CPS1 - Precision in practice: advancing patient care with model-informed precision dosing
ACPE UAN: 0475-0000-25-015-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-CPS1 – A knowledge-base activity

CPS2 - Artificial Intelligence in clinical pharmacy: threat or ally for patient safety?
ACPE UAN: 0475-0000-25-016-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-CPS2 – A knowledge-base activity

INT2 - The patient in charge of the discharge
ACPE UAN: 0475-0000-25-017-L05-P – An application-based activity
ECPhA UAN: 1-ECPEC-2025-INT2 – An application-based activity

W2 - Building a resilient pharmacy workforce and the importance of looking after ourselves - a necessity, not a luxury
ACPE UAN: 0475-0000-25-018-L04-P – An application-based activity
ECPhA UAN: 1-ECPEC-2025-W2 – An application-based activity

SECTION 5: PATIENT SAFETY AND QUALITY ASSURANCE

PSQ1 - Using technology for dispensing and administration: is it always safer?
ACPE UAN: 0475-0000-25-019-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-PSQ1 – A knowledge-base activity

W3 - Person-centered medication review in older people with comorbidities
ACPE UAN: 0475-0000-25-020-L05-P – An application-based activity
ECPhA UAN: 1-ECPEC-2025-W3 – An application-based activity

SECTION 6: EDUCATION AND RESEARCH

ER1 - Hospital pharmacists driving evidence-based versus influencer-based medicine
ACPE UAN: 0475-0000-25-021-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-ER1 – A knowledge-base activity

ER2 - The second life of drugs: opportunities and challenges of drug repurposing
ACPE UAN: 0475-0000-25-022-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-ER2 – A knowledge-base activity

ER3 - Update on the clinical trial landscape
ACPE UAN: 0475-0000-25-023-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-ER3 – A knowledge-base activity

ER4 - Competency-based education – go for knowledge, skill and attitude!
ACPE UAN: 0475-0000-25-024-L04-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-2025-ER4 – A knowledge-base activity

OTHER SESSIONS

PHARMACOTHERAPY SESSION - Pharmacotherapy - anticoagulation therapy in hospitals: let's ask the experts
ACPE UAN: 0475-0000-25-025-L05-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC- EAHP2025 PCT – A knowledge-base activity

YOUNG PROFESSIONALS SESSION - Young Professionals - A European perspective on hospital pharmacy training
ACPE Non-accredited activity
ECPhA Non-accredited activity

SYNERGY SATELLITE - Pitch Perfect: healthcare presentation skills
ACPE UAN: 0475-0000-25-003-L99-P – A knowledge-based activity
ECPhA UAN: 1-ECPEC-EAHP2025-Synergy2 – A knowledge-base activity

EAHP ACTIVITY (Non-Accredited Activities)

PARTNER SESSION - Mental health, a matter for all: perspectives on multi-stakeholders' collaboration

Non-Accredited Activity

SIG - EAHP guidance on the pharmacy handling of in vivo gene therapy medicinal products

ACPE Non-Accredited Activity
ECPhA Non-Accredited Activity

SIG - Controlled substances management

ACPE Non-Accredited Activity
ECPHA Non-Accredited Activity

SIG - Breaking Barriers: the EAHP SIG's progress toward seamless interoperability in hospital pharmacy automation

ACPE Non-Accredited Activity
ECPHA Non-Accredited Activity

INDUSTRY SPONSORED SATELLITES

Omnicell
Transforming Acute Care: The Future of Medication Management is Here!

Baxter
Pharmacists Leading Change

Biocon Biologics
Are Biosimilars the Key to Breaking Barriers for Global Healthcare Access and Sustainability? A look at redefining the future

CurifyLabs
Advancing Digital Automation in Compounding: Patient-Centered Solutions for Personalized Medicine

EQUASHIELD
Pharmacy 2.0: Rethinking Hazardous Drugs and Pharmacy Workflows

15.00-15.45: Defining Hazardous Medications in Europe: Ensuring Compliance and Safety Standards

15.45-16.30: S.M.A.R.T Pharmacist in a S.M.A.R.T Pharmacy

GOOD PRACTICE INITIATIVES ORAL PRESENTATIONS

POSTER AWARD NOMINEES ORAL PRESENTATIONS

The European Association of Hospital Pharmacists (EAHP) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

More information: https://eahp.eu/education/acpe/

The European Association of Hospital Pharmacists (EAHP) and the European Society of Clinical Pharmacists (ESCP) have founded the European Council for Pharmacy Education Accreditation (ECPhA) as a provider of continuing pharmacy education.

More information: https://eahp.eu/education/european-council-pharmacy-education-accreditation-0/

FILL IN THE EVALUATION FORMS OF THE SESSIONS YOU ATTENDED IN ORDER TO RECEIVE YOUR ACPE ACCREDITATION CERTIFICATE AND CERTIFICATE OF ATTENDANCE.

Please be reminded that you will only be able to download the certificates after the Congress. You will have 60 days from the date of the live activity to claim your ACPE accreditation points, the Certificate of attendance and your poster certificate (if applicable), through the EAHP congress portal! The personal logon code from your badge will be required to get the certificates.

eahp synergy/masterclass

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SCIENTIFIC PROGRAMME SCHEDULE

EAHP confirms that the Speakers and the Scientific Committee members responsible for the development of the Congress programme have signed and submitted the Conflict of Interest Disclosure forms.

** Indicates speaker or SC member has stated a conflict of interest which has been reviewed and accepted. See speakers' bios page for more information.*

Tuesday, 11 March 2025

Time	Meetings/Events	Room
12.00-17.00	**Registration opens** (individuals, groups and exhibitors)	**Entrance Foyer**

Wednesday, 12 March 2025

Time	Meetings/Events	Room
07.00-17.00	**Registration opens** (individuals, groups and exhibitors)	**Entrance Foyer**
08.30-10.15	**Opening Ceremony and Keynote 1** – Opportunities and limitations of high-tech evolution *Isabelle François* ACPE UAN: 0475-0000-25-001-L04-P – A knowledge-based activity ECPhA UAN: 0.75-ECPEC-EAHP2025-K1 – A knowledge-based activity	**Hall A1**
10.15	**Exhibition opens to the public**	**Hall D**
10.15-12.00	**Coffee Break and Attended Posters**	**Hall D**
10.30-11.30	**Special Interest Group (SIG) dissemination**	
EAHP guidance on the pharmacy handling of in vivo gene therapy medicinal products *Helle McNulty and Joan Vinent* ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 12**
Controlled substances management *Eleni Rinaki and Andreas Ameln-Mayerhofer* ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 15**
10.30-12.00	**Poster Award Nominees – Oral Presentation**	**Auditorium 10**
Impact of hospital transport systems, including pneumatic tubes, on protein stability in iv bags and syringes ***M. Paulsson***		
Occurrence of potential prescribing cascades after hospital discharge: a cohort study ***F. Karapinar***		
Development and management of icans: risk factors following cd19 car-t therapy in lymphoproliferative disorders ***D. Gomez***		
Economic impact associated to biological therapy optimisation in patients with psoriasis ***M.R. Cantudo Cuenca***		

External validation of population pharmacokinetic models of high dosing methotrexate in pediatric patients with acute lymphoblastic leukemia ***C.J. Moreno Perez***		
Validation of an algorithm for prioritising medication reconciliation at admission using an artificial intelligence method ***A. Belly***		
Continued use of potentially inappropriate medication after hospital discharge: a retrospective cohort study ***J. Van Dalem***		
Performance and concordance of artificial intelligence in the board of pharmacy specialties ***D. Garcia Martinez***		
ACPE Non-accredited activity / ECPhA Non-accredited activity		
10.30-12.00	**Good Practices Initiatives – Oral Presentation**	**Auditorium 11**
Telepharmacological outpatient clinic: development of a cross-sectional virtual polypharmacy counseling service ***L. Karner Overgaard***		
Enhancing professionalism in clinical pharmacist service through digital communication ***M. Rehn***		
Hospital pharmacist in charge of expensive medicines – redesign of the process ***A.van der Aart-van der Beek***		
Side effects of chemotherapy: informing to act better ***L. Nicolas***		
MedsAware: Deprescribing action week, impacts and growth ***K. Michaels***		
Designing a 360° immersive virtual reality tool for training in infusion set-up ***V. Le Bigot***		
Pharmacy student practical formation to pharmaceutical healthcare in hospital care unit ***E. Vitale***		
3D-print of orally disintegrating tablets – how to get started ***K. Koch***		
Exceptional health situations: observation of an immersive exercise in the hospital pharmacy and feedback ***D. Boden***		
A collaborative approach to implement shared care agreements for amiodarone therapy ***K. Joyce***		
Reducing medication waste in hospitals: data-driven solutions at the source ***M. Bogaards***		
ACPE Non-accredited activity / ECPhA Non-accredited activity		
10.30-12.00	**Young Professionals session**	**Room 20**
A European perspective on hospital pharmacy training *Roisin O'Hare, Adrin Dadkhah, Alexis Plan, Chiara Lamesta, Eleni S. Evangelatou* ACPE Non-accredited activity / ECPhA Non-accredited activity		
12.00-13.00	**Synergy Satellite (Part 1)**	**Hall A1**
Pitch Perfect: healthcare presentation skills *(supported by an education grant from Baxter)* *Simon Hall* ACPE UAN: 0475-0000-25-002-L04-P - A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-Synergy1 - A knowledge-based activity		

13.30-14.30	**Lunch**	**Hall D**
14.00	**Meet the Expert – Current issues with controlled substances management and how digitalization can alleviate them** *with Kandrap Thakkar*	**Hall D booth #32**
14.30-15.30	**Partner Session**	**Hall A1**
Mental health, a matter for all: perspectives on multi-stakeholders' collaboration *Peter Almos and Roisin O'Hare* ACPE Non-accredited activity / ECPhA Non-accredited activity		
14.30-15.30	**Seminars**	
IG1 – Cyber-attack, systems down – pharmacy be prepared! *Esther Carcelero and Reinoud Reynders* ACPE UAN: 0475-0000-25-006-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-IG1 – A knowledge-based activity		**Auditorium 11**
SPD1 – New threats around procurement *Martin J. Hug and Hanna Kuosmanen* ACPE UAN: 0475-0000-25-007-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-SPD1 – A knowledge-based activity		**Auditorium 15**
PC1 – Edutainment – using simulation for pharmaceutical technology training *Pascal Bonnabry and Simon Rodier* ACPE UAN: 0475-0000-25-010-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC1 – A knowledge-based activity		**Hall A3**
CPS1 – Precision in practice: advancing patient care with model-informed precision dosing *Sebastian Wicha and Iris Minichmayr* ACPE UAN: 0475-0000-25-015-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-CPS1 – A knowledge-based activity		**Room 18+19**
INT1 – The European landscape on hospital pharmacy logistics *Sotiris Tsiafos-Tsiaras* ACPE UAN: 0475-0000-25-009-L04-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-INT1 – An application-based activity		**Room 16**
W2 – Building a resilient pharmacy workforce and the importance of looking after ourselves – necessity, not luxury *Jamie Hayes* ACPE UAN: 0475-0000-25-018-L04-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W2 – An application-based activity		**Room 17**
14.30-16.00	**Industry Sponsored Satellite**	
Omnicell – Transforming Acute Care: The Future of Medication Management is Here! ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 12**
16.00-17.30	**Coffee Break and Attended Posters**	**Hall D**
16.15	Online Webinar with Takeda - Restoring Hemostasis with Four Factor Prothrombin Complex Concentrates (4F-PCCs) in Patients Receiving Anticoagulants https://eahp.eu/sponsor-channel/takeda-webinar/	
17.00-18.00	**Special Interest Group (SIG) dissemination**	**Room 20**
Breaking Barriers: the EAHP SIG's progress toward seamless interoperability in hospital pharmacy automation *Patrick Koch** ACPE Non-accredited activity / ECPhA Non-accredited activity		

17.00-18.00	Seminars	
PSQ1 – Using technology for dispensing and administration: is it always safer? *Michiel Duyvendak and Christian Sommer* ACPE UAN: 0475-0000-25-019-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-PSQ1 – A knowledge-based activity		**Auditorium 11**
SPD2 – Handling shortages, the EU approach *Lara Wellens and Laure Geslin* ACPE UAN: 0475-0000-25-008-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-SPD2 – A knowledge-based activity		**Auditorium 15**
ER2 – The second life of drugs: opportunities and challenges of drug repurposing *Harald Schmidt and Yoana Nuevo* ACPE UAN: 0475-0000-25-022-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER2 – A knowledge-based activity		**Hall A1**
PC2 – Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition *Venetia Simchowitz* and Esra Furuncu** ACPE UAN: 0475-0000-25-011-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC2 – A knowledge-based activity		**Hall A3**
ER1 – Hospital pharmacists driving evidence-based versus influencer-based medicine *Marco Tuccori and Suzanne McCarthy* ACPE UAN: 0475-0000-25-021-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER1 – A knowledge-based activity		**Room 18+19**
INT2 – The patient in charge of the discharge *Victoria Östman* ACPE UAN: 0475-0000-25-017-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-INT2 – An application-based activity		**Room 16**
W1 – Aseptic handling in hospital pharmacies – challenges ahead *Marina Maurer and Judith Thiesen* ACPE UAN: 0475-0000-25-014-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W1 – An application-based activity		**Room 17**
18.00-20.00	**Get together reception**	**Hall D**
20.00	**Exhibition closes**	**Hall D**

Thursday, 13 March 2025

Time	Meetings/Events	Room
07.30-17.00	**Registration opens** (individuals, groups and exhibitors)	**Entrance Foyer**
08.00	**Exhibition opens**	**Hall D**
08.00-09.00	**Synergy Satellite (Part 2)**	**Hall A1**
Pitch Perfect: healthcare presentation skills *(supported by an education grant from Baxter)* *Simon Hall* ACPE UAN: 0475-0000-25-003-L99-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-Synergy2 – A knowledge-based activity		

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30th EAHP CONGRESS BARCELONA

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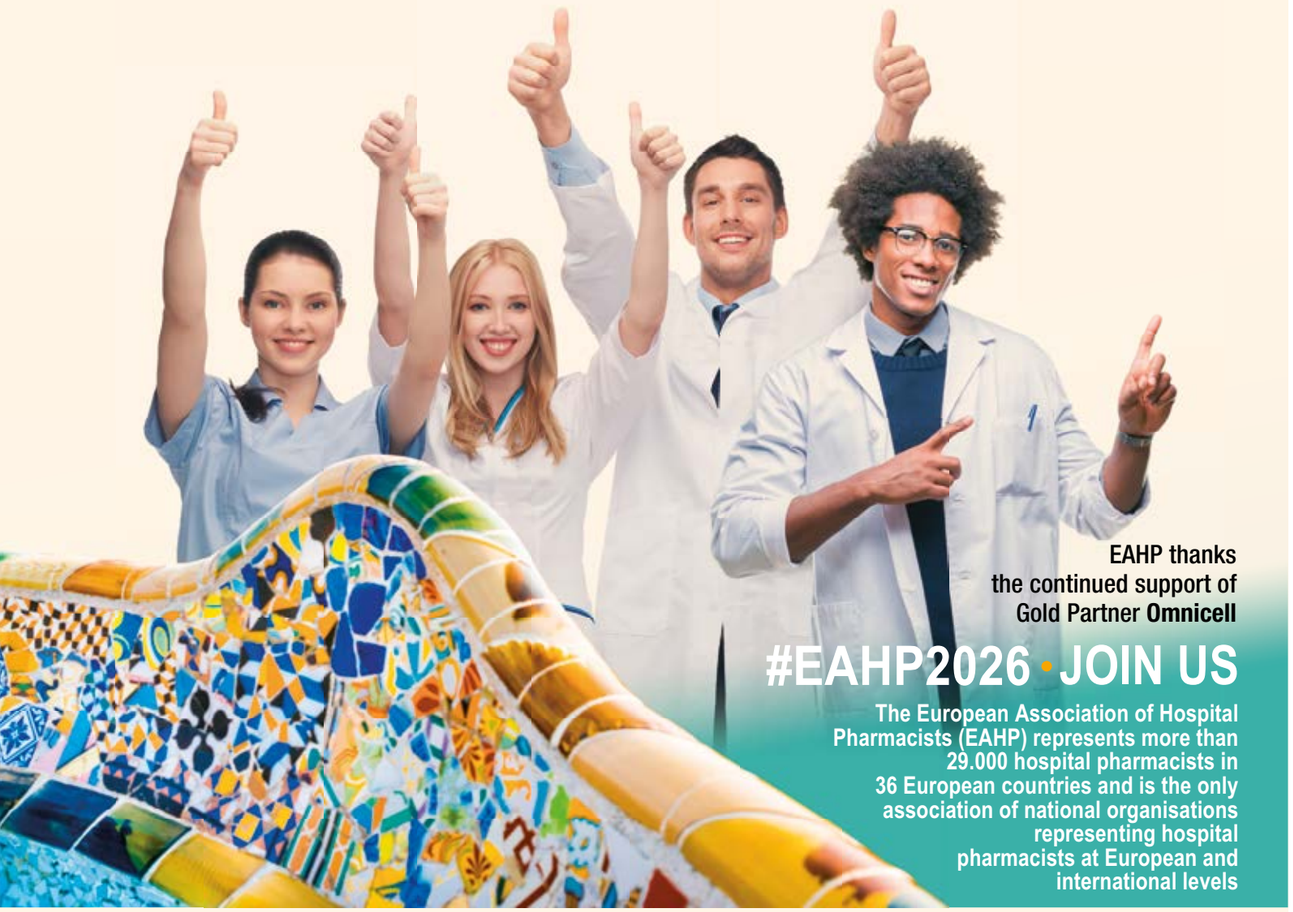

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The European Association of Hospital Pharmacists (EAHP) represents more than 29.000 hospital pharmacists in 36 European countries and is the only association of national organisations representing hospital pharmacists at European and international levels

The **European Association of Hospital Pharmacists** (**EAHP**) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education

The EAHP 2026 Congress is accredited by the **European Council for Pharmacy Education Accreditation** (**ECPhA**)

09.00-10.00	**Seminars**	
IG1 – Cyber-attack, systems down – pharmacy be prepared! *Esther Carcelero and Reinoud Reynders* ACPE UAN: 0475-0000-25-006-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-IG1 – A knowledge-based activity		**Auditorium 11**
SPD1 – New threats around procurement *Martin J. Hug and Hanna Kuosmanen* ACPE UAN: 0475-0000-25-007-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-SPD1 – A knowledge-based activity		**Auditorium 15**
ER3 – Update on the clinical trial landscape *Constantin Pixberg and Mieke Mertens* ACPE UAN: 0475-0000-25-023-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER3 – A knowledge-based activity		**Auditorium 10**
PC1 – Edutainment – using simulation for pharmaceutical technology training *Pascal Bonnabry and Simon Rodier* ACPE UAN: 0475-0000-25-010-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC1 – A knowledge-based activity		**Hall A3**
CPS1 – Precision in practice: advancing patient care with model-informed precision dosing *Sebastian Wicha and Iris Minichmayr* ACPE UAN: 0475-0000-25-015-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-CPS1 – A knowledge-based activity		**Room 18+19**
INT1 – The European landscape on hospital pharmacy logistics *Sotiris Tsiafos-Tsiaras* ACPE UAN: 0475-0000-25-009-L04-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-INT1 – An application-based activity		**Room 16**
W2 – Building a resilient pharmacy workforce and the importance of looking after ourselves – necessity, not luxury *Jamie Hayes* ACPE UAN: 0475-0000-25-018-L04-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W2 – An application-based activity		**Room 17**
09.00-10.30	**Industry Sponsored Satellite**	**Auditorium 12**
Baxter – Pharmacists Leading Change ACPE Non-accredited activity / ECPhA Non-accredited activity		
10.30-11.00	**Coffee Break and Attended Posters**	**Hall D**
11.00-11.45	**Keynote 2** – Navigating the challenges of disinformation in healthcare *Lena Frischlich* ACPE UAN: 0475-0000-25-004-L05-P – A knowledge-based activity ECPhA UAN: 0.75-ECPEC-EAHP2025-K2 – A knowledge-based activity	**Hall A1**
12.00-13.00	**Seminars**	
PSQ1 – Using technology for dispensing and administration: is it always safer? *Michiel Duyvendak and Christian Sommer* ACPE UAN: 0475-0000-25-019-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-PSQ1 – A knowledge-based activity		**Auditorium 11**
SPD2 – Handling shortages, the EU approach *Lara Wellens and Laure Geslin* ACPE UAN: 0475-0000-25-008-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-SPD2 – A knowledge-based activity		**Auditorium 15**

PC2 – Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition *Venetia Simchowitz* and Esra Furuncu** ACPE UAN: 0475-0000-25-011-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC2 – A knowledge-based activity		**Hall A3**
ER1 – Hospital pharmacists driving evidence-based versus influencer-based medicine *Marco Tuccori and Suzanne McCarthy* ACPE UAN: 0475-0000-25-021-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER1 – A knowledge-based activity		**Room 18+19**
INT2 – The patient in charge of the discharge *Victoria Östman* ACPE UAN: 0475-0000-25-017-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-INT2 – An application-based activity		**Room 16**
W1 – Aseptic handling in hospital pharmacies – challenges ahead *Marina Maurer and Judith Thiesen* ACPE UAN: 0475-0000-25-014-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W1 – An application-based activity		**Room 17**
12.00-13.30	**Industry Sponsored Satellite**	
Biocon Biologics – Are Biosimilars the Key to Breaking Barriers for Global Healthcare Access and Sustainability? A look at redefining the future ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 10**
CurifyLabs – Advancing Digital Automation in Compounding: Patient-Centered Solutions for Personalized Medicine ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 12**
13.30-15.00	**Lunch**	**Hall D**
14.00-14.30	**Poster Walk** – *Please join the Scientific Committee during their evaluation of the abstracts posters selected for the Poster Walk*	**Hall D**
Sodium pentobarbital rectal preparations: optimisation of a manufacturing process, and development of formulation ***A-L. Leroy***		
Application of 3d printing to the formulation of a novel anticancer agent for pediatric diffuse intrinsic pontine glioma ***S. Ramos***		
Comparison of robotic and manual reconstitution: stability assessment of protein drugs in hospital compounding ***M. Paulsson***		
Associations between routine blood tests and medication use with adverse clinical outcomes in acutely admitted medical patients ***L. Christensen***		
Pharmacists' and physicians' views on the role of pharmacists in palliative care and deprescribing: a cross-sectional survey ***A. Wagner***		
Machine learning-driven early prediction of voriconazole plasma levels: enhancing precision dosing and patient safety in antifungal therapy ***I. Maray Mateos***		
Compliance and applicability of pro re nata prescribing in a French university hospital ***S. Rodier***		

Impact of adverse drug reactions on length of stay and mortality in hospitalized patients through a clinical administrative national dataset ***I. Oterino Moreira***		
Discrepancies between observed voriconazole clearance and predicted according to cyp2c19 genetic polymorphism. importance of therapeutic drug monitoring ***C.C. Cabañas***		
Harnessing openai as a strategic tool for horizon scanning in hospital pharmacy practice ***R. Varela Fernández***		
ACPE Non-accredited activity / ECPhA Non-accredited activity		
15.00-16.00	**Seminars**	
PC4 – Which clean room technologies? It depends! *Jussi Tervonen and Thomas Storme* ACPE UAN: 0475-0000-25-013-L07-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC4 – A knowledge-based activity		**Auditorium 11**
ER4 – Competency-based education – go for knowledge, skill and attitude! *Ingeborg Wilting and Mia Sivén* ACPE UAN: 0475-0000-25-024-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER4 – A knowledge-based activity		**Auditorium 15**
ER2 – The second life of drugs: opportunities and challenges of drug repurposing *Harald Schmidt and Yoana Nuevo* ACPE UAN: 0475-0000-25-022-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER2 – A knowledge-based activity		**Hall A1**
PC3 – Hospital @ Home *Charlotte Quintens and Vitória Cunha* ACPE UAN: 0475-0000-25-012-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC3 – A knowledge-based activity		**Hall A3**
CPS2 – Artificial Intelligence in clinical pharmacy: threat or ally for patient safety? *Benedict Morath and Etienne Cousein** ACPE UAN: 0475-0000-25-016-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-CPS2 – A knowledge-based activity		**Room 18+19**
PHARMACOTHERAPY SESSION **Anticoagulation therapy in hospitals: let's ask the expert** *Lorenz Van der Linden and Barry Kevane* ACPE UAN: 0475-0000-25-025-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC- EAHP2025 PCT – A knowledge-based activity		**Room 16**
W3 – Person-centered medication review in older people with comorbidities *Lucy Pollock** ACPE UAN: 0475-0000-25-020-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W3 – An application-based activity		**Room 17**
15.00-16.00	**Industry Sponsored Satellite**	
Equashield – *Pharmacy 2.0: Rethinking Hazardous Drugs and Pharmacy Workflows* 15.00-15.45: Defining Hazardous Medications in Europe: Ensuring Compliance and Safety Standards 15.45-16.30: S.M.A.R.T Pharmacist in a S.M.A.R.T Pharmacy ACPE Non-accredited activity / ECPhA Non-accredited activity		**Auditorium 12**
16.30-17.00	**Coffee Break and Attended Posters**	**Hall D**
17.00	**Exhibition closes**	**Hall D**

Friday, 14 March 2025

Time	Meetings/Events	Room
07.00-08.00	**Fun Run – Support Children with Cancer** (Participation 15 Euro) Registration appreciated: kikarun@ziggo.nl	**Entrance of the Congress Centre**
08.00-11.00	**Registration opens** (individuals, groups and exhibitors)	**Entrance Foyer**
09.00	**Exhibition opens**	**Hall D**
09.00-10.00	**Seminars**	
	CPS2 – Artificial Intelligence in clinical pharmacy: threat or ally for patient safety? *Benedict Morath and Etienne Cousein** ACPE UAN: 0475-0000-25-016-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-CPS2 – A knowledge-based activity	**Auditorium 10**
	PC4 – Which clean room technologies? It depends! *Jussi Tervonen and Thomas Storme* ACPE UAN: 0475-0000-25-013-L07-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC4 – A knowledge-based activity	**Auditorium 11**
	ER3 – Update on the clinical trial landscape *Constantin Pixberg and Mieke Mertens* ACPE UAN: 0475-0000-25-023-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER3 – A knowledge-based activity	**Auditorium 12**
	ER4 – Competency-based education – go for knowledge, skill and attitude! *Ingeborg Wilting and Mia Sivén* ACPE UAN: 0475-0000-25-024-L04-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-2025-ER4 – A knowledge-based activity	**Auditorium 15**
	PC3 – Hospital @ Home *Charlotte Quintens and Vitória Cunha* ACPE UAN: 0475-0000-25-012-L05-P – A knowledge-based activity ECPhA UAN: 1-ECPEC-EAHP2025-PC3 – A knowledge-based activity	**Hall A3**
	W3 – Person-centered medication review in older people with comorbidities *Lucy Pollock** ACPE UAN: 0475-0000-25-020-L05-P – An application-based activity ECPhA UAN: 1-ECPEC-2025-W3 – An application-based activity	**Room 17**
10.30-11.30	**Coffee Break and Attended Posters**	**Hall D**
11.30-13.00	**Closing Ceremony and Keynote 3** **Digital health – patient experiences and expectations** *Thomas Whitelaw* ACPE UAN: 0475-0000-25-005-L05-P – A knowledge-based activity ECPhA UAN: 0.75-ECPEC-EAHP2025-K3 – A knowledge-base activity	**Auditoriums 10-11-12**
12.00	**Exhibition closes**	**Hall D**

COPENHAGEN 2025

eahp european association of hospital pharmacists

29TH EAHP CONGRESS
12-13-14 MARCH
PERSON CENTRED PHARMACY - NAVIGATING DIGITAL HEALTH

Copenhagen, Denmark
12-14 March 2025

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GOOD PRACTICE INITIATIVES

ORAL PRESENTATIONS

WEDNESDAY, 12 MARCH 2025 – FROM 10.30 TO 12.00, AUDITORIUM 11

ACPE Non-Accredited Activity, ECPhA Non-Accredited Activity

10.30 - TELEPHARMACOLOGICAL OUTPATIENT CLINIC: DEVELOPMENT OF A CROSS-SECTIONAL VIRTUAL POLYPHARMACY COUNSELING SERVICE
L. Karner Overgaard

10.38 - ENHANCING PROFESSIONALISM IN CLINICAL PHARMACIST SERVICE THROUGH DIGITAL COMMUNICATION
M. Rehn

10.46 - HOSPITAL PHARMACIST IN CHARGE OF EXPENSIVE MEDICINES – REDESIGN OF THE PROCESS
A.van der Aart-van der Beek

10.54 - SIDE EFFECTS OF CHEMOTHERAPY: INFORMING TO ACT BETTER
L. Nicolas

11.02 - MEDSAWARE: DEPRESCRIBING ACTION WEEK, IMPACTS AND GROWTH
K. Michaels

11.10 - DESIGNING A 360° IMMERSIVE VIRTUAL REALITY TOOL FOR TRAINING IN INFUSION SET-UP
V. Le Bigot

11.18 - PHARMACY STUDENT PRACTICAL FORMATION TO PHARMACEUTICAL HEALTHCARE IN HOSPITAL CARE UNIT
E. Vitale

11.26 - 3D-PRINT OF ORALLY DISINTEGRATING TABLETS – HOW TO GET STARTED
K. Koch

11.34 - EXCEPTIONAL HEALTH SITUATIONS: OBSERVATION OF AN IMMERSIVE EXERCISE IN THE HOSPITAL PHARMACY AND FEEDBACK
D. Boden

11.42 - A COLLABORATIVE APPROACH TO IMPLEMENT SHARED CARE AGREEMENTS FOR AMIODARONE THERAPY
K. Joyce

11.50 - REDUCING MEDICATION WASTE IN HOSPITALS: DATA-DRIVEN SOLUTIONS AT THE SOURCE
M. Bogaards

POSTER AWARD NOMINEES

ORAL PRESENTATIONS

WEDNESDAY, 12 MARCH 2025 – FROM 10.30 TO 12.00, AUDITORIUM 10

ACPE Non-Accredited Activity, ECPhA Non-Accredited Activity

10.35 - IMPACT OF HOSPITAL TRANSPORT SYSTEMS, INCLUDING PNEUMATIC TUBES, ON PROTEIN STABILITY IN IV BAGS AND SYRINGES
M. Paulsson

10.44 - OCCURRENCE OF POTENTIAL PRESCRIBING CASCADES AFTER HOSPITAL DISCHARGE: A COHORT STUDY
F. Karapinar

10.53 - DEVELOPMENT AND MANAGEMENT OF ICANS: RISK FACTORS FOLLOWING CD19 CAR-T THERAPY IN LYMPHOPROLIFERATIVE DISORDERS
D. Gomez

11.02 - ECONOMIC IMPACT ASSOCIATED TO BIOLOGICAL THERAPY OPTIMISATION IN PATIENTS WITH PSORIASIS
M.R. Cantudo Cuenca

11.11 - EXTERNAL VALIDATION OF POPULATION PHARMACOKINETIC MODELS OF HIGH DOSING METHOTREXATE IN PEDIATRIC PATIENTS WITH ACUTE LYMPHOBLASTIC LEUKEMIA
C.J. Moreno Perez

11.20 - VALIDATION OF AN ALGORITHM FOR PRIORITISING MEDICATION RECONCILIATION AT ADMISSION USING AN ARTIFICIAL INTELLIGENCE METHOD
A. Belly

11.29 - CONTINUED USE OF POTENTIALLY INAPPROPRIATE MEDICATION AFTER HOSPITAL DISCHARGE: A RETROSPECTIVE COHORT STUDY
J. Van Dalem

11.38 - PERFORMANCE AND CONCORDANCE OF ARTIFICIAL INTELLIGENCE IN THE BOARD OF PHARMACY SPECIALTIES
D. Garcia Martinez

KEYNOTE PRESENTATIONS

OPENING CEREMONY & KEYNOTE 1

Opportunities and limitations of high-tech evolution

Date:	**12/03/2025** - 8:30 to 10:15
Room:	Hall A1
Facilitator:	Thomas de Rijdt
Speakers:	Isabelle François

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.3, 1.7
- **Section 4** – Clinical Pharmacy: Statements – 4.5
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.5

ABSTRACT

The rapid evolution of technology and information processing has profoundly altered our healthcare systems and the way we can provide cost-effective high quality pharmaceutical care. This shift brings a lot of opportunities such as structured electronic prescriptions, clinical decision support systems, clinical rules, risk-based approach for clinical pharmacy deployment and bedside scanning in strive for a closed loop medication system. Also supply chain management, warehousing, distribution, and traceability are lifted to a higher level. Preparations were never more personalised than with 3D-printed drugs and workforce can be freed by implementing compounding robots. Patients can be monitored from a distance via smart wearables, electronic journals and telepharmacy. Continuous education via webinars and e-learnings or consulting an expert at the other side of the world are common practice, but how far must we go? What is the role of chatbots, social media, deep text analysis, blockchain technology and neural networks? Do we need it all ... and at what price?

In this visionary keynote we give you a glimpse of the future, elaborate on opportunities and discuss hurdles and limitations.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- To understand technological innovations in pharmaceutical care.
- To assess the opportunities and limitations of emerging technologies on pharmacy practice.
- To analyse the future role of advanced technologies in healthcare.

EDUCATIONAL NEED ADDRESSED

- Knowledge update on technological advancements.
- Critical appraisal for technology implementation.
- Future readiness and strategic vision.

KEYWORDS

High tech, technology, pharmaceutical care, limitations, automation.

KEYNOTE 2

Navigating the challenges of disinformation in healthcare

Date	**13/03/2025** - 11:00 to 11:45
Room	Hall A1
Facilitator	Gunar Stemer
Speakers	Lena Frischlich

LINK TO EAHP STATEMENTS

- **Section 4** – Clinical Pharmacy: Statements – 4.1
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1
- **Section 6** – Education and Research: Statement Statements – 6.4

ABSTRACT

Disinformation in healthcare can originate from various sources, including social media, unverified online content, and even misinterpretations of scientific studies. It can lead to detrimental health behaviours, such as vaccine hesitancy, misuse of medications, and the adoption of ineffective or harmful treatments.

In today's digital age, disinformation in healthcare poses significant challenges to patient safety and public health. Effective strategies for addressing disinformation are therefore necessary, among them the importance of strong communication skills, digital literacy, and collaboration with other healthcare professionals. Information sources need to be critically evaluated to provide clear and credible information to patients and society.

As frontline healthcare professionals, hospital pharmacists are uniquely positioned to combat the spread of false information and ensure that patients receive accurate, evidence-based guidance. This keynote address will explore the multifaceted nature of healthcare disinformation, its impact on clinical practice, and the critical role of health care professionals in mitigating its effects. Common types of disinformation encountered in healthcare will be discussed and tools to enhance resilience against disinformation are presented.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- to describe various forms of healthcare disinformation commonly encountered in clinical settings.
- to explain the potential impact of disinformation on patient behaviour and public health.
- to recall effective strategies to debunk health care myths and disseminate reliable health information.

EDUCATIONAL NEED ADDRESSED

Hospital pharmacists need to effectively identify, analyze, and combat healthcare disinformation and they need to be equipped with necessary skills and strategies to provide accurate, evidence-based information.

KEYWORDS

Disinformation, social media, communication, evidence-based information.

CLOSING CEREMONY & KEYNOTE 3

Digital health – patient experiences and expectations

Date	**14/03/2025** - 11:30 to 1:30
Room	Auditoriums 10-11-12
Facilitator	Jonathan Underhill
Speakers	Thomas Whitelaw

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.6
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1, 5.5

ABSTRACT

We have heard from the other Keynote addresses at this EAHP Congress how the rapid advancement of digital health technologies, including telemedicine, e-prescriptions, mobile apps, and wearable devices, is transforming the landscape of healthcare across Europe. Patients can have access to sophisticated technologies and often approach their healthcare professional already armed with lots of information about their treatment options. However, this can be extremely variable according to the digital literacy of the person. Their ability to understand the risks and benefits of these options can often be difficult to determine without the help of an informed healthcare professional or advocate. With this comes an increasing need to listen to the person's stories and ascertain what really matters to them and what they understand already, not just simply following the latest technological advance.

This keynote address asks us hospital pharmacists how do we find out what is important to our patients and those seeking our help with their medicines. We will hear about the real-life stories of patients with an insight into their expectations and issues related to healthcare, including how they can navigate advancing digital technologies, from a patient point of view.

LEARNING OBJECTIVES

After the session the participant should be able to:

- Describe how hospital pharmacists can use person-centred care to improve their consultations.
- Discuss the different approaches to making informed shared decisions with patients.
- Describe the different techniques for exploring the values and preferences that a patient holds.

EDUCATIONAL NEED ADDRESSED

This keynote addresses the skills needed by hospital pharmacists to deal with the challenges posed by digital healthcare advances, while putting the person they are caring for at the very centre of that process.

KEYWORDS

Clinical decision support, communication, evidence-based medicine, health literacy, polypharmacy.

SEMINARS

SEMINAR IG1

Cyber-attack, systems down – pharmacy be prepared!

Date	**12/03/2025** - 2:30 to 3:30
	13/03/2025 - 9:00 to 10:00
Room:	Auditorium 11
Facilitator:	Inese Sviestina
Speakers	Esther Carcelero, Reinoud Reynders

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.2, 1.7
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.2

ABSTRACT

Cyberattacks on hospitals can have a devastating impact on patient safety and quality of care. More than 1 in 3 healthcare organizations reported being hit by ransomware in 2020, and the COVID-19 pandemic has further highlighted the importance of cybersecurity in healthcare, with cyberattacks on hospitals increasing by 45% since November 2020.

The consequences of a cyberattack on a hospital pharmacy can be severe, including the theft of confidential patient data, the manipulation of medical records, and the disruption of critical medical equipment. It is essential that hospital pharmacies prioritize cybersecurity to protect their patients and confidential data. Hospitals must recognize that, in cyber incidents, the real victims are the patients. They are at risk physically and digitally when medical devices or treatments are compromised.

Hospitals should have a contingency plan in place to deal with cyberattacks. The checklist must include a disaster recovery plan to restore an organization's protected health data, an emergency mode operation plan or a continuity of operations plan to maintain critical functions that protect health data security, and a data backup plan to routinely copy protected health data to ensure it can be restored in the event of a loss or disruption.

Hospitals should implement advanced technical protections, train employees in cyber protocols, and collaborate with cybersecurity experts to combat these risks. By doing so, they can ensure that their patients receive the highest quality of care and that their confidential data remains secure.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Describe examples how the cyberattacks can affect the hospital work in general and pharmacy in particular.
- Outline the strengths and weaknesses of different disaster recovery plans.
- Discuss the role of hospital pharmacists in prioritizing pharmacy services.

EDUCATIONAL NEED ADDRESSED

This session will focus on how hospital pharmacists can become involved in management of cyberattacks.

KEYWORDS

Cyberattack and cybersecurity, patient safety.

SEMINAR SPD1

New threats around procurement

Date	**12/03/2025** - 2:30 to 3:30
	13/03/2025 - 9:00 to 10:00
Room	Auditorium 15
Facilitator	Torsten Hoppe-Tichy
Speakers	Martin J. Hug, Hanna Kuosmanen

LINK TO EAHP STATEMENTS

- **Section 2** – Selection, Procurement and Distribution: Statements – 2.1, 2.4, 2.5

ABSTRACT

Procurement of medicines by hospital pharmacies is organized very differently in Europe. Some countries have outsourced the price negotiation with pharmaceutical industry to third parties with the obligation to run tenders, some countries have fixed prices, some countries have bargaining between hospital pharmacy or hospital pharmacy owned purchasing organizations with pharmaceutical industry on the basis on free prices and some countries have legislations that are not allowing to import medicines from other countries (with exceptions on an individual patient prescription process only).

On the other hand challenges like drug shortages, medicines affordability and accessibility, patient safety, digitalization and new technologies and even climate change and the development of a green hospital process around medicines procurement.

In this seminar two experienced speakers will discuss the new threats around procurement in hospital pharmacies from their countries but also the European perspective with a focus on collaboration, partnership and the use of digital solutions, drug shortages, budget constraints and the difference between best offer and best price and last but not least under the light of the Supply Chain Due Diligence Act.

LEARNING OBJECTIVES

After the seminar, the participant should be able to:

- Discuss the current challenges of procurement.
- Prioritize the reaction on the different threats coming with medicines procurement.
- Discuss hot digital solutions can help in the field of budget planning.
- Discuss the different national and local approaches to react on those challenge.
- Discuss the positive and negative role of tenders in medicines purchasing.

EDUCATIONAL NEED ADDRESSED

High costs with budget constraints, environmental aspects, accessibility and affordability of medicines are key problems for the hospital pharmacists engaged in procurement processes of the hospital. Knowledge about supply chains and how they might be influenced by ourselves is key.

KEYWORDS

Medicines procurement, drug shortages, hospital pharmacy collaboration, tenders, budget planning, budget constraints.

SEMINAR SPD2

Handling shortages, the EU approach

Date	**12/03/2025** - 5:00 to 6:00
	13/03/2025 - 12:00 to 1:00
Room	Auditorium 15
Facilitator	Thomas de Rijdt
Speakers	Lara Wellens, Laure Geslin

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements 1.1, 1.2, 1.3, 1.5, 1.6
- **Section 2** – Selection, Procurement and Distribution: Statements 2.1, 2.2, 2.5
- **Section 5** – Patient Safety and Quality Assurance: Statements 5.9, 5.11

ABSTRACT

Medication and medical device shortages have become part of our daily life and pose significant risks to patient care, arising from production issues, supply chain disruptions, economic factors, and regulatory challenges. The implementation of the Medical Device Regulation (MDR) and the limited number of notified bodies further exacerbate device shortages.

The European Union (EU) addresses these challenges through initiatives such as the EU Pharmaceutical Strategy, the Health Emergency Preparedness and Response Authority (HERA), and the Medicines Shortages Task Force, aiming to strengthen supply chains, enhance coordination, build strategic reserves, and promote solidarity between the member states.

In Belgium, the competent authority has established a dedicated working group and ad hoc task forces for critical shortages comprising all stakeholders such as hospital pharmacists, prescribers, patient associations, the Ministry of Healthcare, the reimbursement agency, and in close communication with the pharmaceutical industry. These task forces aim to collaboratively address and mitigate the impact of shortages in order to guarantee adequate therapy. Based on the outcome this methodology is seen as good practice.

Despite all these efforts, hospital pharmacists face increased workloads, including managing alternative therapies, communicating with healthcare providers, and ensuring continuous patient care. These shortages directly impact patients, potentially leading to suboptimal treatment outcomes, increased side effects, and decreased quality of care. Addressing these challenges requires ongoing collaboration between regulatory bodies, healthcare institutions, patient associations, and pharmaceutical companies to ensure the consistent availability of essential medications and medical devices.

LEARNING OBJECTIVES

After the seminar, the participant should be able to:

- To analyse the root cause and impact of medication and medical device shortages.
- To evaluate the EU strategies for addressing shortages.
- To implement best practices for managing critical shortages in a hospital pharmacy setting.

EDUCATIONAL NEED ADDRESSED

- Understanding and addressing the complexities of shortages.
- Knowledge of EU strategies to combat shortages.
- Enhancing collaborations and communication among healthcare stakeholders.

KEYWORDS

Shortages, supply chain disruption, patient care impact, EU Commission, strategy.

SEMINAR PC1

Edutainment – using simulation for pharmaceutical technology training

Date	**12/03/2025** - 2:30 to 3:30
	13/03/2025 - 9:00 to 10:00
Room	Hall A3
Facilitator	Juraj Sýkora
Speakers	Pascal Bonnabry, Simon Rodier

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.2
- **Section 3** – Production and Compounding: Statements – 3.4, 3.5
- **Section 6** – Education and Research: Statement Statements – 6.3, 6.4

ABSTRACT

Pharmaceutical technologies include methods, techniques, and instrumentation in the compounding of drugs and other preparations used in the diagnosis and treatment of patients. Training is one of the pillars of quality assurance in pharmaceutical technology.

It is time to change the way operators are trained. To promote effective and satisfactory learning, three main principles must be applied: to keep the lessons short, to promote interactive teaching and to introduce edutainment. The new paradigm is that of "blended-learning": teaching basic knowledge at distance (e-learning/micro-learning) and bringing learners together only to work on technical skills (know-how) and non-technical skills (interpersonal skills) in an interactive and fun way. In these face-to-face teachings, there is the need to forget the ex-cathedra courses and to replace them with interactive approaches, such as peer learning (learners become the teachers), simulation and games.

Simulation is a pedagogical tool now widely used in healthcare education. Healthcare simulation is a technique that creates a situation or environment to allow persons to experience a representation of a real healthcare event for the purpose of practice, learning, evaluation, testing, or to gain understanding of systems or human actions. In other words, simulation makes an experimental situation as close to reality as possible.

Simulation in hospital pharmaceutical technology education is used in three different ways: first, as a playful pedagogical tool, with error-based simulations (cleanrooms and preparation sheets with errors), or game- based simulations (escape games, role-plays, and board games); second, as an electronic tool with virtual reality (virtual cleanrooms and serious games), or augmented reality (3D glasses); finally, to evaluate chemical contamination (fluorescein and quinine tests) and microbiological contamination (media-fill tests) during compounding.

These new approaches are beginning to gain ground in the field of pharmaceutical technology. They are very effective (better than traditional teaching), they are efficient because they rationalise the time of all those involved, and they bring pleasure and satisfaction to learners, as well as to teachers.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- List training methods and techniques used in medicine and pharmacy.
- Describe simulation techniques currently used in the field of hospital pharmaceutical technology education.
- To predict how simulation technologies could be better used in the future.

EDUCATIONAL NEED ADDRESSED

Training of hospital pharmacy personnel is essential for quality assurance in pharmaceutical technology used in hospital pharmacy. Therefore, the hospital pharmacist must know, appraise and apply suitable training methods.

KEYWORDS

Pharmaceutical technology, quality assurance, training, education, edutainment, simulation, game.

SEMINAR PC2

Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition

Date	**12/03/2025** - 5:00 to 6:00
	13/03/2025 - 12:00 to 1:00
Room	Hall A3
Facilitator	Stefanie Deuster
Speakers	Venetia Simchowitz*, Esra Furuncu*

LINK TO EAHP STATEMENTS

- **Section 3** – Production and Compounding: Statements – 3.2
- **Section 4** – Clinical Pharmacy: Statements – 4.2, 4.4, 4.6
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.6

ABSTRACT

Paediatric medicine presents unique challenges, particularly when it comes to drug therapy and nutrition in neonates. The use of drugs in children and neonates often requires off-label administration due to a lack of specific licensing for these age groups. Furthermore, establishing standardized guidelines for parenteral nutrition in neonates is an ongoing challenge, impacting their health and development. This seminar highlights two critical aspects of paediatric care: the complexities of drug therapy and the intricacies of parenteral nutrition in neonates.

In this seminar the first speaker will focus on the special needs of paediatric patients regarding drug pharmacokinetics, formulation, and dosing. The absence of paediatric-specific clinical trials for many drugs often leaves healthcare providers with the challenging task of adapting adult treatments for younger patients. This seminar will explore the challenges in paediatric drug dosing, the limitations of off-label drug use, and strategies to optimize medication safety and efficacy in children.

Neonates, especially those born prematurely, frequently require parenteral nutrition to support their growth and development. Yet, establishing a standardized approach to neonatal parenteral nutrition remains elusive. The second speaker will explain the complexities of neonatal nutritional requirements, the challenges of providing balanced parenteral nutrition, and the impact on neonatal outcomes, as well as current research and practices aiming to improve parenteral nutrition practice for neonates.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Describe strategies to optimise paediatric medication.
- Evaluate the challenges and advantages of standardised parenteral nutrition.
- Discuss the potential of manufacturing paediatric parenteral nutrition.

EDUCATIONAL NEED ADDRESSED

Hospital pharmacists need to know details on paediatric drug therapy as well as the challenges of neonate parenteral nutrition composition and manufacturing.

KEYWORDS

Paediatrics, neonatology, nutrition, drug manufacturing, drug dosing.

SEMINAR PC3

Hospital @ home

Date	**13/03/2025** - 3:00 to 4:00
	14/03/2025 - 9:00 to 10:00
Room	Hall A3
Facilitator	Armando Alcobia
Speakers	Charlotte Quintens, Vitória Cunha

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1
- **Section 2** – Selection, Procurement and Distribution: Statements – 2.2, 2.6
- **Section 3** – Production and Compounding: Statements – 3.2, 3.3, 3.5, 3.6
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.5, 4.6
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.9

ABSTRACT

The Hospital-at-Home (H@H) model is a healthcare delivery model that provides acute hospital-level care to patients in their homes or nursing homes, instead of in a traditional hospital setting. The aging population is living longer with chronic diseases, leading to an increased demand for medical care. Multimorbidity is associated with a higher number of hospitalizations, nosocomial complications, institutionalizations, polypharmacy, and adverse drug effects, resulting in a significant increase in healthcare costs. Hospitals are not always the right environment for many patients who require hospital admission for certain diseases, such as community-acquired pneumonia, congestive heart failure, chronic obstructive pulmonary disease, and cellulitis. If they meet some specific medical eligibility criteria can receive hospital-level care – including diagnostic tests and treatment therapies with a supportive interdisciplinary team consisting of physicians, pharmacists, nurses, nutritionists, and other healthcare professionals. The H@H model has been tested in various medical centres worldwide and is highly rated by patients as it reduces costs and complications.

Hospital-at-Home is becoming more accessible to people due to the advent of new technologies. For instance, remote patient-monitoring devices enable healthcare providers to remotely monitor patient progress and receive alerts if there is an issue. The pandemic has created a catalyst to truly reimaging treatments away from the hospital in a disruptive approach that could change the classical hospital organization into a really patient centred service provider, placing several challenges on hospital pharmacists, particularly regarding the stability of antibiotics in elastomeric pumps and the use of electronic devices, always with the perspective of reducing the number of necessary visits. Even virtual wards must rely on real pharmacists to ensure quality of care.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Understand Hospital at Home model.
- Recognize new trends in hospital organization.
- Optimizing dosage regimens while maintaining therapeutic levels.

EDUCATIONAL NEED ADDRESSED

New challenges are being posed to hospital pharmacists regarding the use of new technologies to ensure safety and quality of pharmaceutical care.

The need to ensure compliance with quality assurance criteria should be assumed as the key factor for the success of different hospitalization treatments.

KEYWORDS

Hospital at home, stability, safety, interdisciplinary teams.

Scientific Programme

SEMINAR PC4

Which clean room technologies? It depends!

Date	**13/03/2020** - 3:00 to 4:00
	14/03/2025 - 9:00 to 10:00
Room	Auditorium 11
Facilitator	Hannah Tolonen
Speakers	Jussi Tervonen, Thomas Storme

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.3
- **Section 3** – Production and Compounding: Statements – 3.2, 3.3, 3.4, 3.5

ABSTRACT

In order to increase patient safety and quality of therapy, the competent authorities introduce higher standards for all pharmaceutical processes. This is also the case for compounding, where PIC/s PE10 becomes mandatory. At the same time there is a continuous evolution in dispensing drugs in the most ready to administer (RTA) form, in order to relieve the nurses so that they can focus on care. Due to the higher cost, hospitals work together to benefit from the effects of economies of scale. Centralized compounding platforms, standardisation, dosebanding and day minus one lab results and prescriptions become common practice.

Although we have the same needs all over Europe, it can be noticed that different countries have a different focus on cleanroom technology resulting in a variety of daily practice. We see laminar flow cabinets and biosafety cabinets versus active or passive isolators, and some hospitals have already implemented compounding robots. We see fixed wall cleanrooms versus box-in-box solutions; weighing zones versus weighing rooms; installations for production of water for injection versus the use of commercially available sterile water;...

In this seminar we elaborate on the reason for these different choices. Is there a scientific rationale or is it mainly a habit? What are the pros and cons for the different technologies and do they differ in cost, ergonomics, maintenance... Two speakers with different approaches comment on their choices and the hurdles they encountered as well as the evolution they've seen over the last decade.

Understanding the different technologies from these testimonies can help the audience by choosing the best fitting technology and to assess their own work environment.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- To understand the different technologies commonly used in cleanrooms in Europe.
- To discuss the pros and cons for the different technologies.
- To assess their own work environment and support their choices when (re)building.

EDUCATIONAL NEED ADDRESSED

This seminar will provide hospital pharmacists with a comprehensive understanding of different clean room technologies and their advantages and disadvantages in order to assess their own work environment or to support their choices when (re)building a cleanroom.

KEYWORDS

Cleanroom, isolator, BSC, LAF, technology, compounding, PIC/s, GMP.

SEMINAR CPS1

Precision in practice: advancing patient care with model-informed precision dosing

Date:	**12/03/2025** - 2:30 pm to 3:30 pm
	13/03/2025 - 9:00 am to 10:00 am
Room:	18+19
Facilitator:	Adrin Dadkhah
Speakers:	Sebastian Wicha, Iris Minichmayr

LINK TO EAHP STATEMENTS

- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.6, 4.8
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1, 5.5

ABSTRACT

Model-informed precision dosing (MIPD) is a promising tool in personalized medicine, offering a novel approach to drug therapy that exceeds traditional dosing guidelines.

The foundation of MIPD lies in the integration of pharmacokinetic (PK) and pharmacodynamic (PD) models with patient-specific data. By incorporating individual patient characteristics such as organ function, genetic makeup and concurrent medications, MIPD facilitates the shift from one-size-fits-all to a more individualized approach.

Therefore, the clinical application of MIPD offers the opportunity to increase drug efficacy and reduce adverse drug reactions, which is particularly crucial in therapeutic areas where the therapeutic window is narrow, such as oncology and critical care.

Advancements in computational tools have accelerated the development of pharmacometric models that enable clinicians to simulate various dosing scenarios and thereby offer guidance in dose selection and adjustment. However, the implementation of MIPD in clinical practice still faces challenges, including the need for interdisciplinary collaboration, education, and the integration of complex models into user-friendly decision support systems. Addressing these challenges is essential to implement MIPD into clinical routine and make use of its potential of tailoring treatments to meet the unique needs of each patient.

This seminar offers an overview of clinical applications for MIPD and discusses requirements and challenges regarding its implementation into clinical practice.

LEARNING OBJECTIVES

After the session the participants should be able to:

- Define the advantages of MIPD in comparison to conventional Therapeutic Drug Monitoring (TDM)
- List the potential barriers and limitations for implementation

EDUCATIONAL NEED ADDRESSED

Hospital pharmacists take a key part in interpreting TDM. Learning new approaches in TDM is essential for an improvement of a pharmaceutical care.

KEYWORDS

Pharmacokinetics, precision medicine approach, drug dosing.

SEMINAR CPS2

Artificial Intelligence in clinical pharmacy: threat or ally for patient safety?

Date	**13/03/2025** - 3:00 to 4:00
	14/03/2025 - 9:00 to 10:00
Rooms	8+19 (13/03/2025) & Auditorium 10 (14/03/2025)
Facilitator	Clément Delage
Speakers	Benedict Morath, Etienne Cousein*

LINK TO EAHP STATEMENTS

- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.2, 4.3, 4.4, 4.6, 4.8
- **Section 5** – Patient Safety and Quality Assurance: Statements

ABSTRACT

The advent of artificial intelligence (AI) has open new horizons and raised crucial questions in the healthcare environment, and clinical pharmacy is no exception. AI, for instance, has now the capability to autonomously detect potentially inappropriate prescriptions by considering patient records, biological analyses, medical history, and physiopathological conditions, and it can do this almost instantaneously for an entire hospital. Consequently, numerous questions arise. What is the relevance and quality of AI's pharmaceutical analyses? Can and should we rely on it? What level of control will we have over its analyses? Does AI threaten the existence of the clinical pharmacist? Behind these questions lies a central concern, the focal point of this seminar: does AI jeopardise the role of the clinical pharmacist, or is it an ally that will become indispensable in optimizing patient safety?

Throughout the presentations, we will first delve into the intricate ecosystem of AI to understand its inner workings. Predictive modelling, big data analysis, and machine learning are techniques that must be understood to assess the advantages and limitations of AI in clinical pharmacy. Subsequently, we will examine its practical integration in clinical pharmacy practice through tools aiding pharmaceutical analysis or via the utilisation of technologies such as ChatGPT as a new source of information.

This session aims to provoke thoughtful reflections on the future of AI in clinical pharmacy, emphasizing its potential and emerging opportunities while also addressing its inherent challenges and limitations. Because beyond the complex mechanisms of AI, our mission remains unchanged: to ensure the safety and well-being of our patients. So, if you're wondering 'Will AI replace the clinical pharmacist?', join us for this seminar. While we may not be able to provide a definitive answer to that question, we hope to drive you to the real one: "Will the clinical pharmacist who uses AI replace the clinical pharmacist who doesn't?".

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Understand the fundamental principles of AI techniques used in clinical pharmacy, including predictive modelling and machine learning.
- Evaluate how AI can be integrated into clinical pharmacy practice through, for example, automated pharmaceutical analysis of medication prescriptions.
- Assess the effectiveness of chatGPT in providing pharmaceutical information and analysis.

EDUCATIONAL NEED ADDRESSED

This conference will provide an overview of the AI tools available in the field of clinical pharmacy. It will present the opportunities they offer for the clinical pharmacist in optimising patient safety and the limitations they present in terms of effectiveness and use.

KEYWORDS

Adverse Drug Reactions, Clinical Decision Support, Documentation, Drug Interactions, Medication Safety, Medication Therapy Management.

Scientific Programme

SEMINAR PSQ1

Using technology for dispensing and administration: is it always safer?

Date	**12/03/2025** - 5:00 to 6:00
	13/03/2025 - 12:00 to 1:00
Room	Auditorium 11
Facilitator	Fatma Karapinar
Speakers	Michiel Duvyendak*, Christian Sommer

LINK TO EAHP STATEMENTS

- **Section 2** – Selection, Procurement and Distribution: Statements – 2.2, 2.7
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1, 5.6, 5.7, 5.10

ABSTRACT

The use of technology in healthcare has become increasingly important in recent years, with many hospitals and healthcare providers adopting new technologies to improve patient outcomes and reduce errors. Artificial intelligence can help prevent dispensing and administration errors by verifying medication labels and dosages. Another technology is the use of pre-packaged medication doses that not only reduces dispensing errors but also streamlines nursing efforts in medication distribution. Nevertheless, new technology also introduces new challenges, resulting in new medication errors that hospital pharmacists need to take into account when implementing these technologies.

Beyond technological solutions, active patient involvement in medication management is imperative. This can be achieved through a variety of methods, such as providing patients with information about their medications, encouraging them to ask questions, and involving them in using their own medication in the hospital. The reuse of home medication in hospitals is an important strategy that could improve patient safety and reduce the time needed for dispensing and administration of medicines. However, also this approach can have limitations, for example when patient's own medications are expired or damaged.

In conclusion, to reduce dispensing and administration errors, and increase patient safety using technology and the reuse of patients own medication, are both important strategies. This seminar will give insight in the different options and the pitfalls to assist hospital pharmacists in safer dispensing and administration of medicines.

LEARNING OBJECTIVES

- After the session, the participant should be able to:
- Know the influence of dispensing aids on medication safety and new errors that could arise.
- Know the influence of patients using their own medicines in automated cabinets and the new errors that could arise.
- Apply knowledge about technology in the dispensing and administration of medicines.

EDUCATIONAL NEED ADDRESSED

Pharmacists could advice nurses on the right use of technology in order to reduce dispensing and administration errors on the one hand and to acknowledge the limitations on the other hand. This seminar will focus on the use of technology in the dispensing and administration process to give guidance to pharmacists.

KEYWORDS

Drug use evaluation, interventions, medication safety, medication error.

83rd FIP World Congress of Pharmacy and Pharmaceutical Sciences

Copenhagen, Denmark
31 August - 3 September 2025

Congress theme:
"Pharmacy forward: Performance, Collaboration, and Health Transformation"

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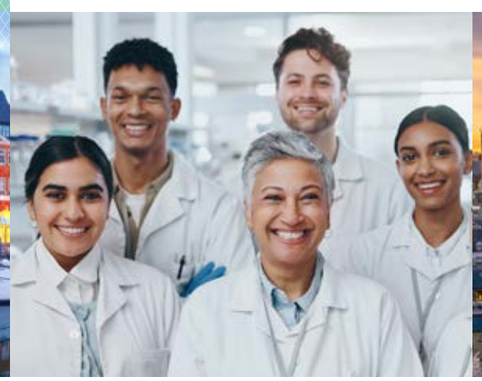

FIP world congress 2025, themed **"Pharmacy Forward: Performance, Collaboration, and Health Transformation"** aims to explore the evolving role of the pharmacy profession in the context of modern healthcare challenges. The congress will explore how pharmacists can drive forward the performance of healthcare systems, foster meaningful collaboration across sectors, and catalyse transformative changes in health outcomes globally.

The congress is structured around three subthemes, each addressing key facets of this overarching theme.

- The subtheme **"Making it sustainable"** focuses on enhancing global health through sustainable resource use, innovative health solutions, and robust policy frameworks.
- **"Making the system work"** emphasises pharmacists' roles in enhancing healthcare efficiency through integrated care, patient safety and innovations like telepharmacy and AI.
- **"Making it personal"** explores personalised medicine's impact on health care, emphasising pharmacists' crucial role in tailoring treatments to improve patient outcomes. It underscores the pharmacist-patient relationship as pivotal for optimising healthcare delivery.

Join us in Copenhagen to be part of this discussion!

Host

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- The Association of Danish Pharmacies
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31 August - 3 September

SEMINAR ER1

Hospital pharmacists driving evidence-based versus influencer-based medicine

Date	**12/03/2025** - 5:00 to 6:00
	13/03/2025 - 12:00 to 1:00
Room	18+19
Facilitator	Daniele Mengato
Speakers	Marco Tuccori, Suzanne McCarthy

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.4, 1.7
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.7
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.4, 5.5, 5.9
- **Section 6** – Education and Research: Statement Statements – 6.4

ABSTRACT

In the rapidly evolving landscape of hospital and clinical pharmacy, the intersection of artificial intelligence (AI), patient engagement platforms, and the influence of social media has opened new avenues for discovery, patient understanding, and ethical considerations. This seminar will explore the dynamic interplay between these elements and highlight their implications for hospital pharmacy.

Social media should be considered both a valuable source of information for the hospital pharmacist, especially when dedicated to real-world research, and a very powerful vehicle of communicating with patients. Knowing how to navigate this mine of publicly available information opens up the possibility for the hospital pharmacist involved in research to observe ongoing phenomena in a large part of the population and to intercept potentially dangerous trends.

One pivotal theme to be addressed is the application of AI in social networks for the detection of Adverse Drug Events (ADEs). Leveraging advanced algorithms and machine learning, hospital pharmacists are increasingly utilizing social media platforms to mine valuable insights into patient experiences with medications. The integration of AI not only expedites the identification of ADEs but also enhances the ability to proactively address potential medication-related issues, contributing to improved patient safety. From this point of view, access to the direct opinions and experiences of patients represents an added value of immeasurable value that requires the knowledge of a healthcare professional to interpret correctly. Indeed, the risk of misuse of social media is linked to the rapid spread of potentially unverified information that has not been communicated by a professional. The boundary between informative content and promotional material blurs as influencers, often with substantial follower bases, endorse medications for uses not approved by regulatory authorities.

This seminar delves into the ethical considerations surrounding such endorsements, exploring the impact on patient perceptions, adherence, and the responsibilities of hospital pharmacists in mitigating potential risks.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Understand the importance of effective social media communication as a health professional.
- Identify the research potential of social media data.
- Discuss the key ethical considerations related to the disclosure and collection of patient health information through social media.

EDUCATIONAL NEED ADDRESSED

This seminar presents the potential of social media for hospital pharmacists, both in terms of monitoring and in terms of patient education and communication.

KEYWORDS

Communication, Medication Safety, Pharmacovigilance, Big Data, Digital Health.

SEMINAR ER2

The second life of drugs: opportunities and challenges of drug repurposing

Date	**12/03/2025** - 5:00 to 6:00
	13/03/2025 - 3:00 to 4:00
Room	Hall A1
Facilitator	Xandra García
Speakers	Harald Schmidt, Yoana Nuevo

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.5
- **Section 2** – Selection, Procurement and Distribution: Statements – 2.2
- **Section 4** – Clinical Pharmacy: Statements – 4.6, 4.7
- **Section 6** – Education and Research: Statement Statements – 6.5

ABSTRACT

Drug repurposing, also known as drug repositioning or reprofiling, refers to the process of identifying new therapeutic uses for existing, ideally registered, drugs that were initially developed for a different indication and even a different target protein.

In this session, we will discuss the key principles underlying the huge potential of drug repurposing based on compound promiscuity, emphasizing the shift from traditional de novo drug discovery to the exploration of existing compounds for new therapeutic indications. Attendees will gain insights into the diverse methodologies employed in identifying repurposable candidates, alone or in combination, with our without a companion diagnostic, ranging from computational approaches, systems and network medicine, and high-throughput screenings.

Drug repurposing can lead to the accelerated approval of treatments, saving both time and resources, compared to the conventional drug development pipeline. The potential of this approach for drug approval is particularly interesting in areas such as rare diseases and unmet medical needs. However, the road to drug repurposing is not without challenges. The session will address issues such as regulatory considerations, intellectual property hurdles, the need for innovative clinical trial designs tailored to repurposed drugs, and reimbursement. Ethical considerations surrounding patient safety and consent will also be explored, emphasizing the importance of striking a balance between speed and thorough evaluation enabled by precision diagnostics and new mechanism-based disease definitions.

Some ongoing initiatives at the European level from the research, regulatory and reimbursement perspective will be discussed to provide hospital pharmacists with a basic understanding of the field's potential. By reimagining the applications of existing drugs, hospital pharmacists can play a pivotal role in expanding treatment options for unmet clinical needs, e.g. by supporting low-cost investigator-initiated trials.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- To identify key principles underlying drug repurposing and the novel methodologies employed in identifying repurposable candidates.
- To discuss challenges associated with drug repurposing, including technical, regulatory and organizational considerations.
- To describe ongoing repurposing initiatives around Europe.

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EDUCATIONAL NEED ADDRESSED

This seminar will provide hospital pharmacists with a comprehensive understanding of drug repurposing, from its fundamental principles and methodologies to the challenges, regulatory and ethical considerations associated with this approach.

KEYWORDS

Clinical Trials, evidence-based medicine, inter-professional communication, outcomes, regulation, reimbursement, research.

Scientific Programme

SEMINAR ER3

Update on the clinical trial landscape

Date	**13/03/2025** - 9:00 am to 10:00 am
	14/03/2025 - 9:00 am to 10:00 am
Rooms	Auditorium 10 (on Thursday) & Auditorium 12 (on Friday)
Facilitator	Virginia Silvari
Speakers	Constantin Pixberg, Mieke Mertens

LINK TO EAHP STATEMENTS

- **Section 6** – Education and Research: Statement Statements – 6.5

ABSTRACT

For many years randomised controlled trials (RCTs) were deemed the gold standard for evidence-based medicine, mainly due to their ability to prevent bias through randomization. However, the landscape has changed, and RCTs are now facing challenges such as time constraints, high costs, and ethical barriers. To overcome such barriers, in recent years alternative clinical trial designs have emerged, each with its strengths and weaknesses.

Under the master protocol framework are grouped new clinical trial designs that investigate one or more than one treatment in multiple subgroups of a study population as opposed to the traditional RCTs, which mostly investigate one drug in one study population. The master protocol clinical trials include: basket trials, umbrella trials, and platform trials.

This seminar will present the changing perspectives of clinical trial designs, comparing classical trial designs with newer trial designs and examining the role of the master protocols in the clinical trial landscape. In addition, a brief outlook on the possible use of artificial intelligence in clinical trials will be given in this seminar.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- List the various clinical trial designs currently available in clinical research.
- Outline the strengths and weaknesses of the different trial designs.
- Discuss the role of the clinical trials within the master protocol framework in the clinical trial landscape.
- Have an idea of how artificial intelligence could be used in clinical trials in the future.

EDUCATIONAL NEED ADDRESSED

This seminar addresses the changing perspectives of clinical trial designs and how clinical research is shifting from classical RCTs to newer trial designs.

KEYWORDS

Randomized clinical trials, master protocol framework, basket trials, umbrella trials, platform trials.

SEMINAR ER4

Competency-based education – go for knowledge, skill and attitude!

Date	**13/03/2025** - 3:00 pm to 4:00 pm
	14/03/2025 - 9:00 am to 10:00 am
Room	Auditorium 15
Facilitator	Stefanie Deuster
Speakers	Ingeborg Wilting, Mia Sivén

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.5
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.6
- **Section 6** – Education and Research: Statement Statements – 6.3

ABSTRACT

As health care professionals, pharmacists require a solid education with a strong academic background. Yet, the fast changing and evolving pharmaceutical and medical knowledge necessitates a shift in training and education strategies. Competency-based education (CBE) has become a fundamental approach to medical education in numerous countries.

Competency-based curricula emphasize four key features: focus on learning outcomes, emphasis on abilities, reduced time-based training and learner-centeredness. The defined learning outcomes describe the knowledge, skills, and attitudes essential for a professional individual in working life.

The design of a successful competency-based system of education begins with identifying desired outcomes and defining performance levels for each competency. This leads to the development of a framework for assessing competencies and finally the (re)evaluation of the programme, enabling continuous improvement.

Competency-based assessments are used to distinguish between the skills and knowledge that you already have, and those for which you need further education and training. The use of entrustable professional activities (EPAs) is an approach to deal with the complex nature of CBE. An EPA is a unit of professional practice that can be fully entrusted to a pharmacist as soon as he or she has demonstrated the necessary competence to execute this activity unsupervised.

EPAs can effectively bridge the gap between educational preparation and job practice, ensuring that pharmacists are equipped not only with knowledge but also with the skills and attitudes necessary for professional success.

This seminar will show examples of innovative approaches illustrating the practical implementation of CBE and EPAs in pharmacy education settings – at undergraduate, postgraduate, and professional development levels. Two experienced speakers will share their experiences, best practices, and insights into successful implementation of CBE.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Outline the principles underlying competency-based pharmaceutical education.
- Evaluate the benefits and opportunities with CBE and EPAs.
- Assess effective strategies for implementing CBE in pharmacy education.

EDUCATIONAL NEED ADDRESSED

In an increasingly complex healthcare system, hospital pharmacists need to know the principles of competency-based pharmaceutical education and its implications for shaping the future of pharmacy training and practice. Hospital pharmacists should use practical strategies to advance the integration of competencies and EPAs in their educational environments, thereby improving the quality of pharmacy education and enhancing patient care outcomes.

KEYWORDS

Education, communication, inter-professional collaborative practice, continuing professional development.

WORKSHOPS

WORKSHOP W1

Aseptic handling in hospital pharmacies – challenges ahead

Date	**12/03/2025** - 5:00 pm to 6:00 pm
	13/03/2025 - 12:00 pm to 1:00 pm
Room	17
Facilitator	Juraj Sýkora
Speakers	Marina Maurer, Judith Thiesen

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.2
- **Section 3** – Production and Compounding: Statements – 3.2, 3.3, 3.4, 3.5
- **Section 6** – Education and Research: Statement Statements – 6.4

ABSTRACT

Aseptic handling is the procedure to enable sterile products to be made ready to administer using closed systems (EU Resolution CM/Res(2016)2). The starting materials are sterile and must be kept sterile during the process. The most important points are trained staff wearing special clothes and sterile gloves, working ´non touch in a Grade A zone (LAF cabinet, safety cabinet or isolator), monitoring, validated processes and using materials and equipment with low bioburden.

Aseptic handling varies in complexity from drawing up of the contents of a vial or ampoule into a syringe, to preparing a parenteral nutrition mixture from several separate starting materials. If antineoplastics (cytostatics) are involved requirements are not only to protect the product against contamination of micro-organisms, but also to protect the operator and the environment from these hazardous medicines.

Because of the risk of medication errors and the chance of microbiological contamination during preparation, aseptic handling is recognised as a high-risk process. In recent years there have been published several original studies on aseptic handling in hospital pharmacies covering topics as microbiological monitoring during aseptic handling, improving the aseptic transfer procedures in hospital pharmacies, reducing the risk of non-sterility of aseptic handling in hospital pharmacies applying risk assessment and risk control. In the session all these issues will be addressed.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Design an aseptic process for a new product including validation and monitoring.
- Assess and redesign aseptic transfer procedures during aseptic handling in hospital pharmacies.
- Apply risk assessment and risk control of non-sterility of aseptic handling in hospital pharmacies.

EDUCATIONAL NEED ADDRESSED

Aseptic handling is an important preparation process used in hospital pharmacies and hospitals. Hospital pharmacist must be able to describe, evaluate and apply recent evidence and understand risks and challenges of aseptic handling.

KEYWORDS

Preparation, aseptic handling, aseptic transfer, non-sterility, microbiological monitoring, risk assessment.

WORKSHOP W2

Building a resilient pharmacy workforce and the importance of looking after ourselves – a necessity, not a luxury

Date	**12/03/2025** - 2:30 to 3:30
	13/03/2025 - 9:00 to 10:00
Room	17
Facilitator	Jonathan Underhill
Speakers	Jamie Hayes

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.5
- **Section 4** – Clinical Pharmacy: Statements – 4.8
- **Section 6** – Education and Research: Statement – 6.2, 6.4

ABSTRACT

Great careers in pharmacy don't just happen, they take planning and skill. How are things at work for you and your team? Concentration problems, insecurity and lack of initiative? Is your hospital workplace making you ill? Worldwide morbidity patterns highlight the high prevalence of mental health problems – the commonest being depression, anxiety and sleep disturbance.

Many people admit to stress at work. A recent workforce wellbeing survey in the UK found that 86% of pharmacists considered themselves to be at high risk of burn out.

Typical causes of work-related stress are an overload of work, bullying, lack of support, lack of leadership and a toxic working environment. This can include threats to professional status and personal standing, and can result in isolation and overwork. Becoming a casualty of a toxic workplace can undermine self-confidence, making people feel upset, threatened, humiliated or vulnerable. The result for all concerned can have a long lasting and devastating impact on individuals and their friends and families as well as on your pharmacy team.

Overview

This workshop will be a highly interactive, leadership and performance, workshop with a difference. It will use examples and experiences gathered from many facets of human life and make them relevant to your current and future career as a hospital pharmacist. Relevant, responsive and with a real-world approach, it will enable pharmacists to build teams that will thrive in a volatile, uncertain, complex and ambiguous world.

The workshop will spotlight workplace behaviours commonly encountered in pharmacy teams and in your working day. It will challenge assumptions made by yourself and others, explore reactions to those situations and help you think about how you make decisions better. Using a solutions-based coaching approach, this workshop will ensure you are equipped with the skills for the future – creativity, adaptability, problem-solving and innovation. And are then able to take this back to your team to inspire them!

The workshop will explore:

- human performance and why we behave the way we do
- the impact of middle managers on people's health, lives and wellbeing
- the power of coaching and key leadership strategies to support your teams' mental health
- happiness traps and how to avoid them
- confidence and personal improvement
- how to improve clinical presence and impact for you and your team

LEARNING OBJECTIVES

After the workshop, delegates will be:

- Able to practice with increased confidence, demonstrate increased clinical presence and improve their impact as a pharmacist and that of their team.
- More proficient at managing their energy and their time, as well as those they manage.
- Inspired to build a pharmacy team from the one they have, to the one they want.

EDUCATIONAL NEED ADDRESSED

- A personalised "resilience prescription" capturing essential coping strategies to combat stress
- Improved confidence, resilience and wellbeing.
- A mindset focused on thriving at work and performing to their potential.

KEYWORDS

Pharmacokinetics, precision medicine approach, drug dosing.

WORKSHOP W3

Person-centered medication review in older people with comorbidities

Date	**13/03/2025** - 3:00 to 4:00
	14/03/2025 - 9:00 to 10:00
Room	17
Facilitator	Jonathan Underhill & Roisin O'Hare
Speakers	Lucy Pollock*

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.3, 1.4
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.3, 4.5, 4.6, 4.7
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1, 5.6

ABSTRACT

As we get older, we tend to develop more co-morbidities, with the usual approach being to use medicines to manage them. The aging population across Europe presents a growing challenge for healthcare systems, particularly in helping people cope with often complex medication regimens. Polypharmacy is associated with increased risks of adverse drug events, drug-drug interactions, and medication non-adherence. As conditions progress and the clinical context changes, the risk benefit ratio for some medicines change with some medicines moving from benefit to burden. When there is no or a limited evidence base for safely stopping medicines, a pragmatic and safe approach is needed, making sure the person and/or their carers are at the centre of these decisions. Meaningful conversations, where risks and benefits of medication choices are carefully explained, are a key to this.

This facilitated, interactive, case-based workshop will use clinical case studies and vignettes to explore medication review in older people. The cases will allow for brief discussions regarding the therapeutics at play. The session will also allow for and include brief discussions around decision making and communication in this complex area of healthcare, focusing on how to have meaningful conversations with patients, carers and other healthcare professionals. The session will discuss how prescribers and those who influence prescribing, faced with a changing clinical context, can be become more confident in taking an approach to safely stopping medicines in older people, where this is agreed with the person.

LEARNING OBJECTIVES

- Improve understanding of the problems of polypharmacy in older people.
- Identify the principles of safely stopping medicines in older people.
- Learn to recognise and deal with specific circumstances for reviewing medicines in older people e.g. cardiovascular medicines, anticoagulants, diabetic medicines and certain primary prevention medicines.
- The seminar will also seek to explore the following:
- An increased confidence in dealing with medicines in older people.
- Understand the clinical reasoning of a geriatrician and how shared decision making is employed at the bedside.
- Improve your situational awareness and understanding what's going on.
- Better conversations to identify scripts and phrases to improve conversations with patients and carers.
- How to learn and react, when it doesn't go as expected

EDUCATIONAL NEED ADDRESSED

This session will address the value of having meaningful conversations with patients, carers and healthcare professionals and how this can enable pharmacists to become more confident in reviewing medicines in older people, and stopping them where appropriate and consensual.

KEYWORDS

Aging, Communication, dementia, end of life, ethics, evidence-based medicine, geriatrics, medication therapy management, pain management, pharmaceutical care, polypharmacy.

INTERACTIVE SESSION

The European landscape on hospital pharmacy logistics

Date	**12/03/2025** - 2:30 to 3:30
	13/03/2025 - 9:00 to 10:00
Room	16
Facilitator	Despoina Makridaki
Speakers	Sotiris Tsiafos-Tsiaras

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.5
- **Section 2** – Selection, Procurement and Distribution: Statements – 2.2, 2.6, 2.7
- **Section 4** – Clinical Pharmacy: Statements – 4.8
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.1, 5.10, 5.11

ABSTRACT

To ensure continuation of patient treatment during hospital admission, it is essential that the prescribed medication is available to each individual patient. The process of ensuring this can be quite complex and involve several steps – sometimes in collaboration with other hospital staff and sometimes with a level of automation.

The process differs between hospitals pharmacies throughout Europe. However, it is likely that we can gain inspiration from each other and consequently implement optimized processes locally, which is the aim of this session.

When a medication is lacking or low in stock at the ward, medication orders are created by either ward staff, hospital pharmacy staff or even automatically by e.g. dose dispensing machines.

At some hospitals, medication orders from individual wards may be handles frequently, others order once a week depending on the stock size and the number of acute orders.

Acute orders may be delivered to the ward within a short timeframe by the hospital pharmacy, or a nurse may pick it up from the hospital pharmacy.

Some hospital pharmacies employ drivers to deliver medication between sites, while others fit into the logistic process of the hospital.

Finally, some hospital pharmacies deliver services 24/7, while others have limited opening hours.

The session will discuss various steps of this logistics process with examples presented by European hospital pharmacists.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- To list steps involved in the logistics process of medication orders to distribution of medication to the wards.
- To discuss pros and cons of the listed steps including automation of the process.
- To evaluate the role of the hospital pharmacy staff in the logistics process.

EDUCATIONAL NEED ADDRESSED

In order to ensure the best possible logistics processes from ordering medication to delivery at the ward, it is necessary for hospital pharmacists to routinely review and optimize the logistics processes at their hospitals – and seek information from colleagues from other countries.

KEYWORDS

Medication delivery system, communication, automation, safety.

YOUNG PROFESSIONALS SESSION

Young Professional. European perspective on hospital pharmacy training

Date	**12/03/2025** - 10:30 to 12:00
Room	20
Facilitator	Clément Delage
Speakers	Roisin O'Hare, Alexis Plan, Adrin Dadkhah, Chiara Lamesta, Eleni S. Evangelatou

LINK TO EAHP STATEMENTS

- **Section 6** – Education and Research: Statement Statements

ABSTRACT

This year's Young Professionals Session will be dedicated to the education and training required to become a hospital pharmacist.

While we all share the same profession and title, "hospital pharmacist", across Europe, the education and specializations required to achieve this differ. Pre-graduation education, post-graduation specialization, internships, residency, specific diplomas—training varies by country, though some similarities exist between different European nations. In this conference, several hospital pharmacists will present their country's training programs for becoming a hospital pharmacist. They will explain how these programs enable them to practice high-quality pharmacy tailored to their diverse responsibilities, as well as discuss some of their negative aspects. This conference will provide a European and international perspective on hospital pharmacist training and offer insights for potential future harmonization of these educational paths.

Join the Young Professionals Session to be trained in hospital pharmacy across Europe!

PHARMACOTHERAPY SESSION

Anticoagulation therapy in hospitals: let's ask the experts

Date	**13/03/2025** - 3:00 to 4:00
Room	16
Facilitator	Virginia Silvari
Speakers	Lorenz Van der Linden, Barry Kevane

LINK TO EAHP STATEMENTS

- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.8

ABSTRACT

Annually, millions of patients worldwide, who suffer from thromboembolic conditions, necessitate anticoagulation therapy. Despite the undeniable advantages of anticoagulants in reducing thromboembolic events, these medications can be responsible for adverse drug events in hospitalized patients.

Particularly anticoagulation management is more complex in those patients with comorbidities such as renal or liver impairment, or patients with specific characteristics such as high body weight, and frailty, patients with a high risk of bleeding or who have previously experienced bleeding events while on anticoagulants.

In this interactive session, our panel of experts will discuss the management of anticoagulation therapy in complex case scenarios and will answer questions on issues the attendees have encountered while managing their patients on anticoagulants or anticoagulant reversal agents.

LEARNING OBJECTIVES

After the session, the participant should be able to:

- Discuss the importance of shared decision-making between the hospital pharmacist (HP), physicians and patients on anticoagulants.
- Recognize those patients for whom anticoagulation management can be complex and challenging.
- Outline the essential role of the HP in the management of anticoagulation in patients with comorbidities or other characteristics that make the anticoagulation treatment more complex.

EDUCATIONAL NEED ADDRESSED

This interactive session addresses the expertise that HPs require when the anticoagulation treatment of patients with thromboembolic diseases becomes challenging due to patients' comorbidities or characteristics.

KEYWRDS

Anticoagulants, shared decision-making, comorbidities.

SYNERGY SATELLITE SESSION

Pitch perfect: healthcare presentation skills

Date	**12/03/2025** - 12:00 to 1:00
	13/03/2025 - 8:00 to 9:00
Room	Hall A1
Facilitator	Sonja Guntschnig
Speakers	Simon Hall

LINK TO EAHP STATEMENTS

- **Section 6** – Education and Research: Statements

ABSTRACT

Join us for "Pitch Perfect: Healthcare Presentation Skills", a specialised two-part workshop series tailored for healthcare professionals, particularly those involved in research and academia. Facilitated by Simon Hall, an esteemed communicator from the University of Cambridge, this workshop is designed to enhance the presentation skills necessary for your PhD defence, research talks, and professional congresses.

The initial session focuses on fundamental public speaking techniques to help researchers effectively introduce their studies, maintain clarity throughout their exposition, and conclude with compelling takeaways that resonate with academic and clinical audiences. Techniques for crafting concise, clear narratives are emphasised, alongside strategies for delivering key messages with brevity and impact.

In the subsequent session, participants will delve into advanced presentation skills, applying these to their research presentations. This includes the proficient use of slides and visual aids, best practices for data presentation, and tips for eliminating redundancies to enhance the authority and clarity of the talk. Participants will also learn to manage public speaking anxiety, use body language effectively, and employ storytelling to make their research memorable and engaging.

Ideal for healthcare professionals gearing up for critical academic presentations, this workshop equips you with the skills to deliver your research findings with confidence and professionalism. Simon Hall brings his extensive experience in training medical professionals and a deep understanding of communication dynamics in academic settings, ensuring that this workshop is an indispensable resource for any researcher looking to make an impactful presentation at conferences and beyond.

LEARNING OBJECTIVES

Session one:

- Develop Fundamental Skills: Learn the art of crafting impactful openings, maintaining clarity of narrative throughout your talk, and closing in a manner that leaves a lasting impression.
- Appreciate the unexpected arts of public speaking: Explore the power of simplicity and brevity, and how you can use them to ensure audience engagement.
- Consider completeness of narrative: Understand the elements required to tell a complete story, which satisfies an audience by answering all their questions about your topic.

Session two:

- Enhance Presentation Techniques: Gain expertise in using visual aids effectively, as well as handling data with precision and elegance.
- Understand the art of persuasion and influencing: how to employ storytelling to emotionally engage and captivate your audience.
- Boost Confidence and Authority: Overcome nervousness with proven strategies, perfect your body language for authoritative delivery, and ensure active audience attention through strategic signposting.

COPENHAGEN 2025

EDUCATIONAL NEED ADDRESSED

- Deliver Compelling Presentations: Master the art of structuring and delivering engaging talks that clearly communicate complex research to diverse audiences.
- Enhance Visual Impact: Skilfully use visual aids and data to reinforce your message, ensuring your research is both understood and memorable.
- Conquer Presentation Nerves: Adopt effective techniques for managing anxiety and using body language to present with confidence and authority

KEYWORDS

Communication, Research, Education, Leadership, Teaching

Scientific Programme

SIG SESSIONS

SIG SESSION 1

EAHP guidance on the pharmacy handling of in vivo gene therapy medicinal products

Date	**12/03/2025** - 10:30 to 11:30
Room	Auditorium 12
Facilitator	Ana Lozano
Speakers	Helle McNulty, Joan Vinent

ABSTRACT

Link to EAHP Statements:

- **Section 2** – Selection, Procurement and Distribution: Statements – 2.6
- **Section 3** – Production and Compounding – 3.5, 3.6
- **Section 5** – Patient Safety and Quality Assurance: Statements –5.9, 5.10

ABSTRACT

This guidance document was developed by expert members of this SIG convened by the EAHP to update the EAHP's Guidance on the Pharmacy Handling of Gene Medicine published in 2007. Areas for update were identified by a literature review of existing guidance and through the expert opinions of the SIG members. An initial kick-off meeting was held after development of the outline to discuss updates and additional content. A series of draft documents were produced, with each incorporating comments and input from the members of the SIG. The Appraisal of Guidelines for Research (AGREE) II document was followed while preparing these guidelines. AGREE II consists of two global rating items and 23 further items within six domains (scope and purpose, stakeholder involvement, rigour of development, clarity of presentation, applicability and editorial independence), which allow the quality of a guidance document to be assessed. The final draft was validated and approved by external experts.

Gene therapy is becoming increasingly prevalent, with new gene therapy medicinal products (GTMPs) being approved for use every year. Hospital pharmacists are expected to prepare and dispense these products. However, a recent survey by the Special Interest Group (SIG) on Handing Gene Therapy Medicines identified a wide range of experience across centres in Europe, with some centres having relatively extensive experience while other centres reported having very little experience. As such, there is a need for practical guidance to help hospital pharmacies create safe and effective workflows, and to support a degree of standardisation of procedures across Europe.

Here, we present the EAHP's updated guidance on the handling of GTMPs. This document takes into account the substantial advances in recent years in GTMP technology and marketing approval being granted for a number of GTMPs in Europe. Each aspect of the GTMP handling process is addressed, including receipt and storage, dispensing and reconstitution, transportation, administration, waste disposal, decontamination of spills and accidental exposure. A series of charts are provided to aid the development of practical workflows.

This guidance document is intended as a framework to help develop institutional SOPs and should always be used in conjunction with local regulations.

Scientific Programme

LEARNING OBJECTIVES

After the session, the participants should be able to:

- Gain an overview of the work done by the SIG on the preparedness of hospital pharmacy departments for the delivery of in vivo GTMPs.
- Outline the practical recommendations for the handling of GTMPs across the entire workflow of receiving a shipped product from the manufacturer, through to medicine reconstitution, transport, administration to the patient, advising patients/caregivers, waste disposal and procedures for accidental spills or exposures.
- Apply these guidelines in developing institutional standard operating procedures for the handling of gene therapy medicinal products.

EDUCATIONAL NEED ADDRESSED

There is a need for updated practical guidance to aid hospital pharmacy teams in developing institutional standard operating procedures for the safe handling of GTMPs across the entire workflow.

KEYWORDS

Genetic therapy; Pharmaceutical preparations; Pharmacy service, hospital; Safety; Practice guideline.

SIG SESSION 2

Controlled substances management

Date	**12/03/2002** - 10:30 am to 11:30 am
Room	Auditorium 12
Facilitator	
Speakers	Eleni Rinaki, Andreas von Ameln-Mayerhofer

LINK TO EAHP STATEMENTS

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.7
- **Section 2** – Selection, Procurement and Distribution: Statements – 2.6, 2.7–
- **Section 4** – Clinical Pharmacy: Statements – 4.2, 4.4
- **Section 5** – Patient Safety and Quality Assurance: Statements – 5.2, 5.6, 5.7, 5.11.

ABSTRACT

Managing Controlled Substances (CS) (i.e., medicines subject to stringent governmental regulations, with addictive and/or abusive potential) is a complex and time-consuming process for hospital pharmacists (HPs) in Europe. To better understand the current situation and explore how new technologies could facilitate CS management, the European Association of Hospital Pharmacists (EAHP) established a Special Interest Group (SIG).

The SIG focused on investigating CS management in Europe through the following methods:

Conducting a survey among individual pharmacists,

Reviewing scientific literature and existing recommendations, and

Mapping the regulatory environment surrounding CS management in European countries to assess similarities and differences in national legislation.

The survey revealed that the greatest challenges for HPs are dispensing, patient administration, and registration. Despite limited resources, the literature review highlighted the importance of implementing diversion prevention programs. Mapping national legislation across European countries revealed the complexity of managing CS and underscored the need for a more harmonized and digital-friendly legislative framework.

The SIG identified advancements in technology as having strong potential to improve the traceability and accountability of CS management across Europe. However, progress is often hindered by the need for greater awareness and training for all stakeholders, as well as limitations in existing digital and physical infrastructure in hospitals, which may not be equipped to accommodate new technologies. In particular, the lack of interoperability between systems presents a significant challenge.

In response, the SIG developed 19 recommendations to improve CS management within European hospitals, targeting all stakeholders involved, including hospital pharmacists, hospital management, healthcare professional, and policymakers.

LEARNING OBJECTIVES

- To gain an overview of the different approaches to managing controlled substances within EAHP member countries.
- To assess the benefits and risks of automating new technologies in the management of controlled substances.
- To review the recommendations made by the SIG to further improve CS management in hospitals.

EDUCATIONAL NEEDS ADDRESSED

This session will focus on exploring the recommendations made by the SIG on Controlled Substances

KEYWORDS

Controlled substances, hospital pharmacists, European hospitals, technology, regulatory SIGenvironment, diversion prevention, digitalization, interoperability,

SIG SESSION 3

Breaking barriers: the EAHP SIG's progress toward seamless interoperability in hospital pharmacy automation

Date	**12/03/2025** - 5:00 to 6:00
Room	20
Facilitator	Louis Bertin
Speakers	Patrick Koch*

LINK TO EAHP STATEMENTS

Section 1 – Introductory Statements and Governance: Statements – 1.1, 1.7

Section 5 – Patient Safety and Quality Assurance: Statements – 5.1, 5.2, 5.10, 5.11

ABSTRACT

- Hospital pharmacy automation holds the potential to enhance medication safety, efficiency, and resource optimization. However, interoperability remains a critical barrier to widespread adoption. The absence of vendor-neutral communication protocols leads to integration challenges, increased costs, and limited flexibility in system implementations. Recognizing this challenge, EAHP launched a Special Interest Group (SIG) on Interoperability, bringing together hospital pharmacists and industry leaders to develop a standard communication framework for automation equipment, such as packs dispensing, unit dose dispensing robots and automated dispensing cabinets.
- The EAHP SIG on Interoperability aims to establish a foundation for seamless automation integration by defining common use cases, developing a vendor-neutral communication protocol, and preparing for real-world validation. The goal is to create a standardized framework that simplifies procurement, implementation, and maintenance of automation solutions while ensuring interoperability between systems such as robotic dispensing, unit dose preparation, and automated storage.
- The SIG follows a two-phase approach. First, hospital pharmacists document real-world workflows using a standardized narrative to establish common use cases. Then, vendors will translate these into technical specifications leveraging existing interoperability standards like FHIR, HL7, and IHE. Over the next 12 months, the SIG will refine these specifications in preparation for testing during a live Connectathon, where participants will evaluate interoperability in real-world scenarios.
- As the SIG progresses, it will assess interoperability challenges, propose solutions, and engage stakeholders in the development of standardized communication protocols. Early vendor engagement has demonstrated a willingness to collaborate. The initiative is expected to reduce custom integration costs, facilitate automation adoption, and improve medication management workflows.
- The EAHP SIG on Interoperability is laying the groundwork for a vendor-neutral approach to hospital pharmacy automation. By fostering collaboration between hospital pharmacists and industry leaders, this initiative seeks to accelerate automation adoption, enhance efficiency, and improve patient safety. The coming year will be critical in shaping the technical specifications and preparing for real-world validation, setting the stage for broader implementation across European hospital pharmacies and beyond

LEARNING OBJECTIVES

Understand the Challenges of Interoperability in Hospital Pharmacy Automation

- Gain Insight into the EAHP SIG's Approach to Standardization and Understand how vendor-neutral communication protocols can facilitate the adoption of automation technologies.
- Discuss a few example use cases the SIG is focusing on to make it more real for participants as they can relate to it.

PARTNER SESSION

Mental health, a matter for all: perspectives on multistakeholder collaboration

Date	**12/03/2025** - 8:30 to 10:15
Room	Hall A1
Facilitator	Nenad Miljković
Speakers	Peter Almos, Roisin O'Hare

LINK TO EAHP STATEMENTS:

- **Section 1** – Introductory Statements and Governance: Statements – 1.1, 1.3, 1.5
- **Section 4** – Clinical Pharmacy: Statements – 4.1, 4.8

ABSTRACT

Over the years, the European Association of Hospital Pharmacists (EAHP) has fostered increasing collaboration with European organisations representing various healthcare professionals and patient groups. In alignment with these efforts, the EAHP Board introduced this session to strengthen partnerships and highlight the importance of interdisciplinary collaboration in healthcare. This session serves as a platform for the partner organisations to present an overview of their work and explore synergies that contribute to improved patient outcomes.

In 29th EAHP Congress the organisations participating in the "Mental health, a matter for all: Perspectives on Multistakeholder Collaboration" the Standing Committee of European Doctors (CPME), representing national medical associations across Europe.

This session will underscore the pressing need for collective efforts to tackle mental health challenges and will explore the role that hospital pharmacists -together with patients and other healthcare professionals- can play in ensuring a holistic approach to support mental health through an effective engagement in shared decision-making and medication counselling. EAHP will present the link between chronic conditions and mental health, with a particular focus on the needs of young patients, as well as a focus on identification and prevention of mental health and some of the challenges faced by healthcare professionals in addressing mental health of patients. CPME will take a broader view, addressing the societal and systemic factors influencing mental health, including unemployment, rising living costs, the climate crisis, and pressures from the digital sphere, impacting mental health of both patients and healthcare professionals. They will advocate for cross-sectoral policies to promote mental health and well-being, highlighting the importance of prevention, early intervention, and ensuring access to affordable, high-quality care. Particular attention will be paid to safeguarding children and young people, especially in the online environment, and exploring innovative approaches such as social prescribing. CPME will also highlight the significance of training and capacity-building for healthcare professionals, and the need to improve collaboration between hospital pharmacists and primary care providers to enhance patient follow-up and treatment continuity.

LEARNING OBJECTIVES

After this session, attendees should be able to:

- Understand insights on mental health, sexual wellbeing, and the key role of healthcare professionals in addressing barriers to holistic mental health care.
- Examine innovative approaches, such as social prescribing, and advocate for prevention-focused policies, highlighting the hospital pharmacist's role in promoting mental health and wellbeing.
- Strengthen the professional capacity of hospital pharmacists and other healthcare professionals through training, multidisciplinary collaboration and knowledge-sharing to improve mental health support and treatment outcomes.

EDUCATIONAL NEED ADDRESSED

How can hospital pharmacists better understand the impact of chronic conditions on mental health and support patients in this context? What strategies can hospital pharmacists employ to collaborate effectively with primary care and other healthcare providers to improve mental health outcomes? How can hospital pharmacists contribute to addressing the societal, economic, and environmental factors influencing mental health and impacting on patient care?

KEYWORDS

Multi-stakeholder collaboration, Mental Health, Hospital Pharmacists, Patient Care, EAHP, , Standing Committee of European Doctors.

Scientific Programme

INDUSTRY SPONSORED SATELLITES

Wednesday, 12 March		
Time	**Meetings/Events**	**Room**
14.30-16.00	Industry Sponsored Satellites	
	Omnicell Transforming Acute Care: The Future of Medication Management is Here!	**Auditorium 12**

Thursday, 13 March		
Time	**Meetings/Events**	**Room**
9.00-10.30	Industry Sponsored Satellites	
	Baxter Pharmacists Leading Change	**Auditorium 12**
12.00-13.30	Industry Sponsored Satellites	
	Biocon Biologics Are Biosimilars the Key to Breaking Barriers for Global Healthcare Access and Sustainability? A look at redefining the future	**Auditorium 10**
	CurifyLabs Advancing Digital Automation in Compounding: Patient-Centered Solutions for Personalized Medicine	**Auditorium 12**
15.00-16.30	Industry Sponsored Satellites	
	EQUASHIELD Pharmacy 2.0: Rethinking Hazardous Drugs and Pharmacy Workflows 15.00-15.45 - Defining Hazardous Medications in Europe: Ensuring Compliance and Safety Standards 15.45-16.30 - S.M.A.R.T Pharmacist in a S.M.A.R.T Pharmacy	**Auditorium 12**

Omnicell

Our speakers are delighted to invite you to attend their Satellite Symposium on:

Transforming Acute Care: The Future of Medication Management is Here!

Date: Wednesday 12th March 2025
Time: 14:30 - 16:00
Location: Auditorium 12

Hardeep Bagga
Director of Pharmacy at University of Coventry and Warwickshire Hospital

Oskar Dixelius
Hospital Pharmacist at Uppsala University Hospital

Paula Müller
Clinical Pharmacist at University Hospital Carl Gustav Carus Dresden

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Pharmacists Leading Change

Equipped with the right skills, knowledge, and experience, **Pharmacists can lead changes** to healthcare delivery to **improve patient outcomes** and **operational efficiency.**

In this session, three pioneering pharmacists will showcase practice change, sharing **their experiences and lessons learned.**

Thursday, 13th March / 9:00–10:30 am
Auditorium 12

SESSIONS:

Leading on Fluid Stewardship - Practice Change Throughout the Hospital

Stephanie Wuyts (Brussels, Belgium)
Hospital Pharmacist and Clinical Pharmacologist, University Hospital of Brussels

Driving Big Changes for Little Patients - Neonatal Nutrition Optimization

Sarah Zeraschi (Leeds, UK)
Consultant Pharmacist Nutrition, Leeds Teaching Hospitals

Implementing Clinical and Economical improvements in Antimicrobial Therapy

Meera Jalota (Derby, UK)
Advanced Clinical Pharmacist – Antimicrobials, University Hospitals of Derby and Burton

Biocon Biologics®

Industry Satellite Symposium

"Are **Biosimilars** the key to **Breaking Barriers** for **Global Healthcare Access** and **Sustainability?** A look at redefining the future"

DATE
13th March

TIME
12.00-13.30

PLACE
Auditorium 10

Time	Topic	Speaker
12:00 - 12:05	Welcome note and opening remarks	**Rahul Kapur** Head Medical Affairs-EM and COE, Biocon Biologics Limited (India)
12:05 - 12:20	**Missed opportunity?** Have *Biosimilars* been the *Game-Changer* we need	**Uwe Gudat** Chief Medical Officer, Biocon Biologics (Switzerland)
12:20 - 12:35	**Myth or Reality** Are we letting fear outpace science?	**Elena Wolff-Holz** Global Head-Clinical Development, Biocon Biologics (Germany)
12:35 - 12:50	**From Complexity to Clarity** Onchemo's impact on Oncology workflows	**Hartmut Link** Professor of Medicine, External Faculty, Hannover Medical School (Germany) Former Head Dept. Hematology and Oncology, Academic Hospital Kaiserslautern (Germany)
12:50 - 13:05	**Focussing on what matters** Evolving framework for Biosimilars approval	**Arlene Wolny** Head of Global Regulatory Affairs, Biocon Biologics (US)
13:05 - 13:25	**Biosimilars in action - The Road Ahead** Panel Discussion	Moderator - **Uwe Gudat** Panel - **Arlene Wolny** **Elena Wolff-Holz** **Hartmut Link**
13:25 - 13:30	Closing remarks and call to action	**Rahul Kapur** Head Medical Affairs-EM and COE, Biocon Biologics Limited (India)

EM-Emerging Market; COE-Center of Excellence; US-United States

NON-2025-00007-GL

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INDUSTRY SATELLITE
Auditorium 12, Thursday13th March, 12:00 - 13.30

DR NIKLAS SANDLER
CurifyLabs

DR JANA LASS
Tartu University Hospital, Estonia

CEO ERIK HAEFFLER
APL (Apotek Produktion & Laboratorier AB), Sweden

PHARMACIST GIUSEPPE FUSCO
Farmacia Mura Greche and iGalenici, Italy

PHARMACIST INES EL KHELIFI
Johannes Wesling Klinikum Minden, Germany

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Join the symposium sessions:

Thursday / 13 March 2025

15:00 – 15:45

Defining Hazardous Medications in Europe: Ensuring Compliance and Safety Standards

Fred Massoomi, Pharm.D., BCSCP, FASHP;
Pharmacy Compliance Consultant, Albarello

- **Definition of Hazardous Drugs:** Criteria for categorizing hazardous medications in Europe.
- **European Regulations:** Overview of EU guidelines for handling hazardous drugs (e.g., ECDC, EMA).
- **Health and Safety Standards:** Protecting healthcare workers and patients from exposure risks.
- **Compliance Challenges:** Addressing common barriers to meeting regulatory requirements.
- **Best Practices for Safe Handling:** Procedures for preparation, storage, and disposal of hazardous drugs.
- **Monitoring and Documentation:** Ensuring traceability and auditability in compliance efforts.
- **Case Studies:** Examples of successful compliance in European healthcare settings.
- **Future Directions:** Evolving regulations and technologies for safer hazardous drug management.

15:45 – 16:30

S.M.A.R.T Pharmacist in a S.M.A.R.T Pharmacy

Mr. Grzegorz Buńko. Msc of Pharmacy,
Head of Cytostatic Compounding Pharmacy,
University Clinical Centre of Gdansk

- **Streamlining Workflow:** Optimized workflows to promote safety and repeatability in the workplace.
- **Maximizing Safety:** Implement Closed System Transfer Devices to minimize exposure to cytotoxic drugs and reducing errors risks.
- **Automation for Standardization:** Implementing advanced automation to guarantee consistency, and process control.
- **Revolutionizing Pharmacy Life:** Upgrade the approach to promoting positive work culture.
- **Traceability:** Transparency through clear data and process monitoring.

Join us for a live demo at booth #36

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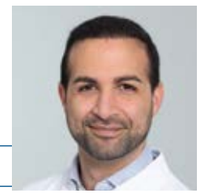
SPEAKER'S BIOGRAPHIES

Adrin Dadkhah



Young Professionals – A European perspective on hospital pharmacy training

Affiliation: University Medical Centre Hamburg-Eppendorf

Country: Germany

1. CURRENT POSITION

Dr. Adrin Dadkhah is Head of Research & Development of the Hospital Pharmacy and Clinical Pharmacist in the Department of Stem Cell Transplantation, University Medical Centre Hamburg-Eppendorf.

2. EDUCATION

After graduation at the Faculty of Pharmacy in Erlangen-Nuremberg in 2017, Dr. Adrin Dadkhah started his residency at the University Medical Centre Hamburg-Eppendorf, where he obtained his PhD in pharmacometrics in 2022 and completed the specialization in Clinical Pharmacy in 2023. He is currently completing the MBA program in Health Care Management at the University of Hamburg.

3. RESEARCH AREA

- Dr. Adrin Dadkhah research focuses on a holistic approach towards dose individualization through both model-informed precision dosing and pharmaceutical 3D-printing of solid oral dosage forms.

Conflict of interest: None

Alexis Plan

Young Professionals – A European perspective on hospital pharmacy training

Affiliation Centre Hospitalier Intercommunal des Alpes du Sud

Country France

CURRENT POSITION

Dr. Alexis Plan is currently a hospital pharmacist at the Centre Hospitalier Intercommunal des Alpes du Sud. He coordinates clinical pharmacy within the territorial hospital group. He is also a pharmacist in the home hospitalisation service.

EDUCATION

After completing a five-year programme at the Faculty of Pharmacy in Marseille in 2018, Dr Alexis PLAN obtained a specialist diploma in health system pharmacy following a four-year pharmacy residency programme in 2023. In 2022, he obtained an MSc in Artificial Intelligence Applied to Pharmacy from the University of Aix-Marseille.

RESEARCH AREA

Dr. Alexis PLAN's professional activities focus on clinical pharmacy in the internal medicine department, coordinating pharmacist for home hospitalisation and optimising hospital pharmacy processes.

Conflict of interest: None

Andreas von Ameln-Mayerhofer

SIG – Controlled substances management

Affiliation Sindelfingen-Boeblingen Hospital

Country Germany

CURRENT POSITION

Dr. von Ameln-Mayerhofer is currently Head of Pharmacy Department at the hospital Sindelfingen-Boeblingen. He is responsible for clinical pharmacy activities. He is also lecturer at the University of Tuebingen.

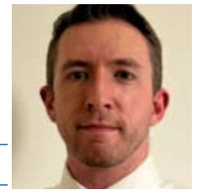
EDUCATION

Dr. von Ameln-Mayerhofer studied Pharmacy at the University of Freiburg (Germany) and obtained his doctoral degree at the University of Tuebingen in the Department of Neuropharmacology. His current specialization topic is Clinical Pharmacy and Infectiology.

Research area Dr. von Ameln-Mayerhofer's main research area is Clinical Infectiology and antimicrobial stewardship, with focus on therapeutic drug monitoring, clinical pharmacology and pharmacy.

Conflict of interest: None

Barry Kevane



Pharmacotherapy – anticoagulation therapy in hospitals: let's ask the experts

Affiliation Mater Misericordiae University Hospital

Country The Republic of Ireland

CURRENT POSITION

Dr. Barry Kevane is a Consultant Haematologist and Clinical Lead for Thrombosis/Coagulation Haematology at the Mater Misericordiae University Hospital, Dublin. Dr. Kevane is also a Principal Investigator with the UCD Conway SPHERE Research group at University College Dublin.

EDUCATION

Dr. Kevane completed undergraduate medical training in 2008 (University College Cork, Ireland). Following completion of postgraduate training in General Internal Medicine, he commenced the higher specialist training programme in Clinical and Laboratory Haematology, completing his training in 2018 (Royal College of Physicians of Ireland). During his training programme, Dr. Kevane also undertook a PhD in the field of translational medicine, with a focus on disorders of thrombosis and haemostasis. He was appointed to his current post at the Mater Hospital in 2019.

RESEARCH AREA

Dr. Kevane's clinical and research focus is in the diagnosis and management of thrombotic disorders.

Conflict of interest: None

Benedict Morath

CPS2 – Artificial Intelligence in clinical pharmacy: threat or ally for patient safety?

Affiliation Heidelberg University Hospital

Country Germany

CURRENT POSITION

Dr. Benedict Morath is currently a hospital pharmacist at Heidelberg University Hospital. He is responsible for pharmaceutical care in the Cardiothoracic Surgery Department and manages the division of clinical pharmacy research of the hospital pharmacy.

EDUCATION

Dr. Morath studied Pharmacy in Heidelberg and graduated in 2014. He obtained a PhD in Clinical Pharmacology in 2019 and is a specialized clinical pharmacist since 2019.

Conflict of interest: None

Charlotte Quintens

PC3 – Hospital @ Home

Affiliation UZ Leuven

Country Belgium

CURRENT POSITION

Charlotte Quintens is currently a hospital pharmacist at UZ Leuven. She is responsible for back-office clinical pharmacy activities. Charlotte is also the coordinator of the OPAT care pathway at UZ Leuven, member of the hospital outbreak support team, and part of the clinical pharmacist team on the paediatric oncology ward.

EDUCATION

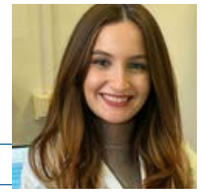
Charlotte Quintens studied at the KU Leuven and became licensed pharmacist in 2014 and hospital pharmacist in 2017. In 2021, she obtained her PhD in Pharmaceutical Sciences at KU Leuven, with a dissertation titled `Check of medication appropriateness: A centralised tool for hospital-wide pharmacotherapeutic optimisation'.

RESEARCH AREA

Primary research interests of Charlotte Quitnens relate to computerised optimisation of pharmacotherapy and outpatient parenteral antimicrobial therapy.

Conflict of interest: None

Chiara Lamesta



Young Professionals – A European perspective on hospital pharmacy training

Affiliation NHS Foggia(Italy)

Country Italy

CURRENT POSITION

Dr. Chiara Lamesta is currently a hospital pharmacist at NHS. She is responsible of clinical pharmacy activities and compounding sterile and nonsterile formulations laboratory. Dr. Lamesta is a member of the Faculty Council of the University of Parma. Her major teaching is for postgraduate professional pharmacy programmes.

EDUCATION

Dr. Lamesta studied Pharmacy at the University of Bari. She specialized in Hospital Pharmacy at the University of Bari in 2017. In 2020, she obtained MSc in Pharmacoepidemiology and Therapy Evaluation from the University of Padua in Italy.

RESEARCH AREA

Since 2015, Dr. Chiara Lamesta has gained extensive experience across various healthcare settings, including ambulatory care, acute care, and long-term care, within nationally recognized, high-volume medical facilities with over 1100 beds. Currently, Dr. Lamesta leads the compounding department at the NHS, with a particular focus on rare diseases. Her research also focuses on pharmacoeconomic studies, drug utilization, and drug safety studies, utilizing real-world data from administrative healthcare databases. Recently, she has also begun exploring the field of narrative medicine.

Conflict of interest: None

Christian Sommer

PSQ1 – Using technology for dispensing and administration: is it always safer?

Affiliation University Medical Center Hamburg Eppendorf

Country Germany

CURRENT POSITION

Christian Sommer is a clinical pharmacist and specialized in medication management in hospitals. He is the director of the hospital pharmacy, designee of medication safety and pharmacovigilance at University Medical Centre Hamburg Eppendorf, Germany. As a member of Bundesverband Deutscher Krankenhausapotheker (ADKA) he is committed to development of standards for clinical pharmacists intervention within the medication process.

EDUCATION

Christian Sommer studied pharmacy at the University of Hamburg and became a licensed pharmacist in 2008. He finished his specialization as a clinical pharmacist and in medication management at the Medical Centre Hamburg Eppendorf. Since 2014 he is authorized for further training in these subjects.

RESEARCH AREA

Christian Sommer research focuses on medication safety, closed loop medication management and pharmacists´ interventions with special interest in internal transfer from the intensive care unit, management in acute kidney injury and de-escalation of antibiotics.

Conflict of interest: None

Constantin Pixberg

ER3 – Update on the clinical trial landscape

Affiliation Heidelberg University Hospital

Country Germany

CURRENT POSITION

Dr. Pixberg currently works in gynecological oncology at the NCT and is in charge of the translational registry programs and the translational phase studies of breast cancer.

EDUCATION

Dr. Pixberg completed his medical studies at Heinrich Heine University Dusseldorf, Germany from 2010-2017 with residencies at Heidelberg University Hospital, Germany and Memorial Sloan Kettering Cancer Center, New York, USA. He has been a licensed physician since 2017 and has started his further training as a hematologist/oncologist at the National Center for Tumor Diseases.

RESEARCH AREA

Dr. Pixberg's research focuses on translational oncology, in particular concerning the genomic landscape and evolution of breast cancer. A particular focus here is the establishment of interventional studies based on translational registry programs.

Conflict of interest: None

Eleni Rinaki

SIG – Controlled substances management

Affiliation "Agios Georgios" Chania General Hospital

Country Greece

CURRENT POSITION

Dr. Eleni Rinaki is currently head hospital pharmacist in a 600-bed public health hospital in Greece. She leads all activities in the hospital pharmacy, including management of controlled substances, clinical consultancy to healthcare professionals, patients information on medicines, budget, logistics, automations in medicines' storage and quality issues. She also participates in hospital 's scientific committees, such as antimicrobial stewardship, infections' control and formulary committee.

EDUCATION

Dr. Eleni Rinaki studied Pharmacy at National and Kapodistrian University of Athens and became licensed pharmacist in 1998. In 2000, she obtained her MSc in Industrial Pharmacy and in 2005 her MSc in Biostatistics from the same univesrity. In 2007 she obtained a PhD in biopharmaceutics at National and Kapodistrian University of Athens for her work on mathematical modeling of absorption for orally administered medicines.

RESEARCH AREA

Dr. Rinaki's research focuses on antimicrobial stewardship projects, controlled and advanced antibiotics, medicine shortages, controlled substances and pharmacoeconomic issues.

Conflict of interest: None

Eleni S. Evangelatou

Young Professionals – A European perspective on hospital pharmacy training

Affiliation	REA Hospital, Pharmacy Department
Country	Greece

CURRENT POSITION

Ms. Eleni Evangelatou currently works as the Head of Pharmacy Department at REA Hospital in Athens. She ensures the safe and efficient dispensation of medications and works closely with clinical staff to support medication management and patient care. Eleni also ensures compliance with healthcare regulations and standards within the hospital.

EDUCATION

Ms. Eleni Evangelatou studied Pharmacy at the University of Patras in Greece and became licensed pharmacist after completing her practice in both community and hospital pharmacies. In 2023 she completed her Master's degree in Drug Discovery and Development at the University of Patras, part of which included an internship at the Laboratory of Pharmacogenomics, University of Cagliari, Italy.

RESEARCH AREA

Ms. Eleni Evangelatou focuses on hospital pharmacy, concentrating on optimizing medication management and ensuring safe, effective treatment regimens. Her expertise in pharmacogenomics helps personalize therapies to improve patient outcomes in the hospital setting.

Conflict of interest: None

Esra Furuncu*

PC2 – Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition

Affiliation Heinrich Heine University Düsseldorf

Country Germany

CURRENT POSITION

Esra Furuncu is currently a pharmacist at Heinrich Heine University of Düsseldorf, working in collaboration with Sapiotec GmbH, Würzburg. She is responsible for teaching pharmaceutical technology to sixth-semester pharmacy students as part of the state exam course and is actively involved in scientific research. Esra Furuncu is also a 3rd-year PhD student at the Institute of Pharmaceutics and Biopharmaceutics.

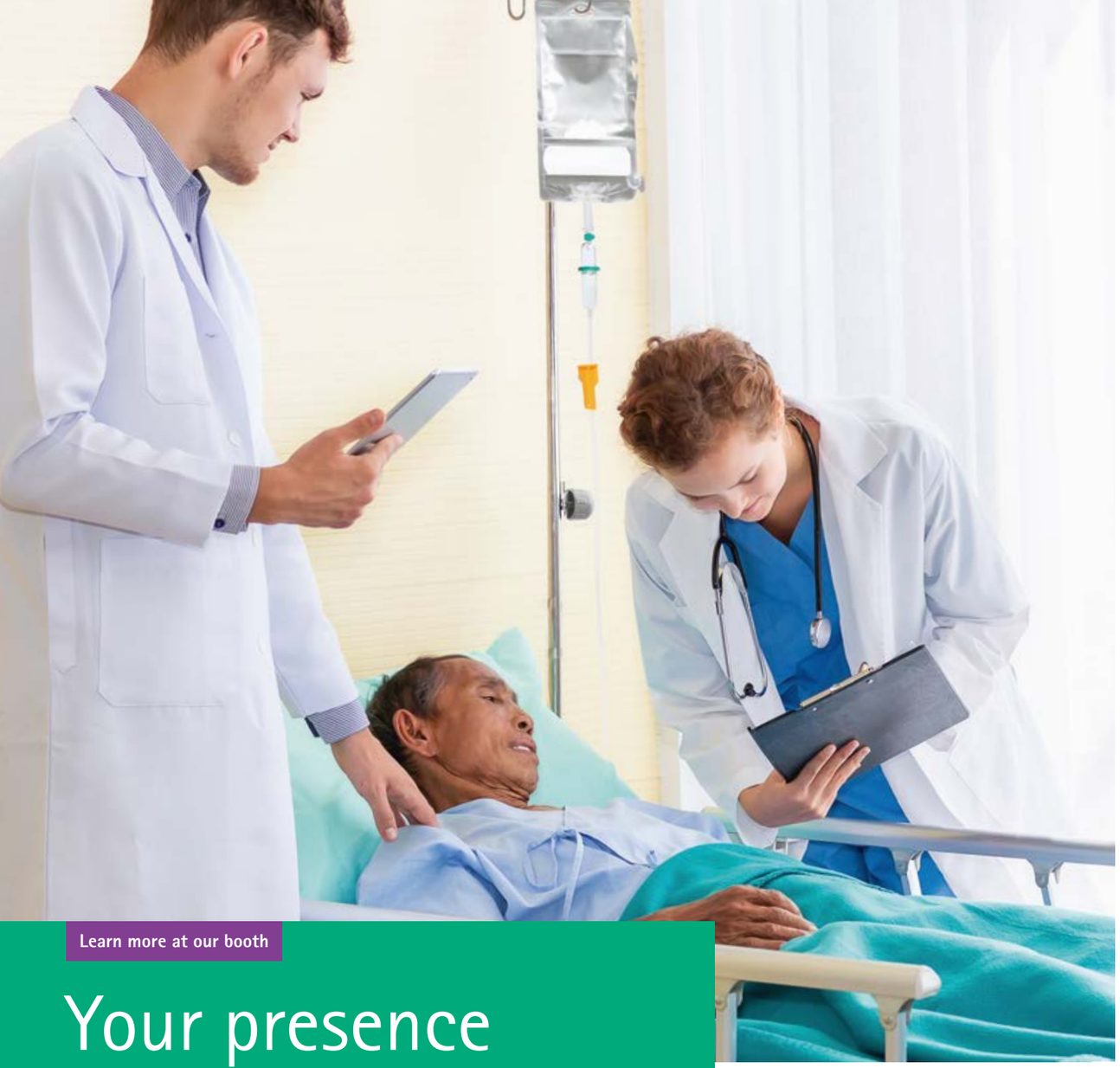
EDUCATION

Esra Furuncu studied Pharmacy at the Heinrich Heine University of Düsseldorf and became licensed pharmacist in 2022.

RESEARCH AREA

Esra Furuncu's research focuses on the development of orodispersible films that can be inkjet-printed with low-dose active ingredients for pediatric use and advanced solid dosage forms such as lozenges to increase mucoadhesivity of active ingredients on the oral mucosa.

Conflict of interest: Employed by Sapiotec GmbH



Esther Carcelero

IG1 – Cyber-attack, systems down – pharmacy be prepared!

Affiliation Hospital Clinic Barcelona

Country Spain

CURRENT POSITION

Esther Carcelero is currently a hospital pharmacist at Hospital Clinic Barcelona. She is responsible of pharmacy activity in oncohematology patients (out and inpatients, excluding clinical trials).

EDUCATION

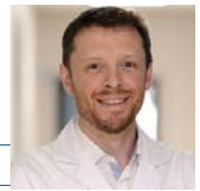
Esther Carcelero studied Pharmacy at the University of Barcelona and became licensed pharmacist in 2004. She specialized in hospital pharmacy in Hospital Clinic Barcelona (2006-2010). She was in charge of oncohematology trials (pharmacy part) in Hospital Germans Trias i Pujol (Badalona, Spain) from 2013 until 2015. She obtained American specialization BCOP in oncology pharmacy in 2014.

RESEARCH AREA

Esther Carcelero's research focuses on real life data of efficacy, security and drug interactions of oncohematology therapies.

Conflict of interest: None

Etienne Cousein*



CPS2 – Artificial Intelligence in clinical pharmacy: threat or ally for patient safety?

Affiliation University Of Lille, UFR3S

Country France

CURRENT POSITION

Dr. Etienne Cousein is currently associate professor at the Lille Pharmacy School, and the founder and Chief Scientific Officer of PharmIA, a company specializing in artificial intelligence for hospital pharmacist. He is also hospital pharmacist on extended leave at the Lille Academic Hospital.

EDUCATION

After completing a five years pharmacy program at the Lille Pharmacy School in 2004, Dr. Etienne Cousein has obtained a specialized degree in health system pharmacy after a four years pharmacy residency program in 2008. In 2014, he obtained a PhD in clinical pharmacy at the Lille University for his work on the role of the hospital pharmacist in medication management by the elderly.

RESEARCH AREA

Dr. Etienne Cousein's research is focused on preventing errors in medication prescription, dispensing and administration, thanks to a better understanding of human-human and human-machine cooperation. Recently, as the scientific coordinator of the industrial chaire eLoDi, his research has focused on artificial intelligence, clinical decision support systems and robotics in the hospital pharmacy field.

Conflict of interest: Served as Scientific Advisor at Pharmia

Hanna Kuosmanen

SPD1 – New threats around procurement

Affiliation HUS Pharmacy

Country Finland

CURRENT POSITION

Ms. Hanna Kuosmanen is currently a procurement pharmacist at HUS Pharmacy. Her department is responsible for the procurement and tendering of hospital medicines for the Southern Finland collaboration area, as well as certain national tenders. Ms Hanna Kuosmanen is also a member of the HUS Group's clinical assessment group, which coordinates decision-making and the procurement of new medicines for HUS.

EDUCATION

Ms. Hanna Kuosmanen studied Pharmacy at the University of Helsinki. At the moment she is studying Industrial Engineering and Management in Lappeenranta-Lahti University of Technology.

RESEARCH AREA

Ms. Hanna Kuosmanen majored in industrial pharmacy in her studies.

Conflict of interest: None

Harald Schmidt

ER2 – The second life of drugs: opportunities and challenges of drug repurposing

Affiliation Maastricht University, Department of Pharmacology and Personalised Medicine

Country The Netherlands

CURRENT POSITION

Prof. Dr. Harald HHW Schmidt is currently professor of Pharmacology at Maastricht University, Netherlands, and chairs the Department of Pharmacology and Personalised Medicine.

EDUCATION

Prof. Dr. Harald HHW Schmidt studied Pharmacy at the Lidwig-Maximilian-University Munich, and Medicine at the Universities of Freiburg and Berlin, Germany. He obtained is PhD in 1987 at the University Freiburg, and later habilitated at the University of Würzburg, Germany. He did his postdoctoral training at Northwestern University, Chicago, with the later Nobel laureate Ferid Murad. He held chairs in Pharmacology at the University of Gießen, Germany, and Monash University, Melbourne, Australia. He was awarded an ERC Advanced Investigator Grant and is running the Horizon Europe platform project REPO4EU (https://repo4.eu).

RESEARCH AREA

Prof. Dr. Harald HHW Schmidt works in Systems Medicine to redefine diseases mechanistically and translate this via big data, diagnostics and drug repurposing for rapid clinical validation and application.

Conflict of interest: None

Helle McNulty

[SIG – EAHP guidance on the pharmacy handling of in vivo gene therapy medicinal products]

Affiliation Capital Region Pharmacy

Country Denmark

CURRENT POSITION

Helle McNulty is currently Chief business development officer at The Capital Region Pharmay in Copenhagen. The role entails portfolio management, innovation and responsibility for a range of climate initiatives in relation to medicine and medicine usage.

EDUCATION

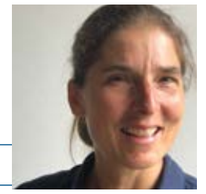
Helle McNulty holds a MSc. Pharm, DMS, (Diploma in Management studies, University of Leicester), DTU-UC Berkeley Executive Leadership Program, Innovation Leadership. Helle has contributed to numerous publications including a patent.

RESEARCH AREA

Helle McNulty has a background as a professional in hospital pharmacy management, clinical pharmacy, research, CIVA service management with focus on chemotherapy, GMP, clinical trials, and ATMP therapy. A proven track record in product innovation with operational experience in all the development phases from IP to market access.

Conflict of interest: None

Ingeborg Wilting



ER4 – Competency-based education – go for knowledge, skill and attitude!

Affiliation UMC Utrecht, Department of Clinical Pharmacy

Country The Netherlands

CURRENT POSITION

Dr. Ingeborg Wilting is currently working as a hospital pharmacist at UMC Utrecht. She is responsible for the training of hospital pharmacists at UMCU. She is also training director of the NVZA(Dutch Association of Hospital Pharmacists), which means that she is responsible at national level for coordinating the training programme for hospital pharmacists. Currently she is involved in the PhD project of a PhD student performing research on further aligning the training of hospital pharmacists toward their clinical role taking in to account the focus on to their product knowledge role.

EDUCATION

Dr. Ingeborg Wilting, studied pharmacy at university Utrecht. Subsequently she finished the training for hospital pharmacist in Tilburg. She obtained her PhD in 2008 on the thesis entitled "patterns and clinical outcomes of lithium treatment": supervised by Prof Dr. A.C.G. Egberts, hospital pharmacist, Prof Dr. W.A, Nolen, psychiatrist, Dr. E.R. Heerdink, pharmacoepidemiologist. Since 2009 she is working as a hospital pharmacist, clinical pharmacologist at UMC Utrecht. In 2020 she started the teaching scholar program within UMCU Since 2021 she is officially in charge of the training for hospital pharmacy in UMC Utrecht. Since 2021 she is in charge of the national coordination of the training for hospital pharmacist for the Dutch Society of hospital pharmacy (NVZA).

RESEARCH AREA

Dr. Ingeborg Wilting 's research focusses on pharmacotherapy within psychiatry and geriatrics and currently on education with in the field of training of hospital pharmacists.

Conflict of interest: None

Iris Minichmayr

CPS1 – Precision in practice: advancing patient care with model-informed precision dosing

Affiliation Medical University of Vienna

Country Austria

CURRENT POSITION

Dr. Iris Minichmayr is an Assistant Professor at the Department of Clinical Pharmacology at the Medical University of Vienna and lead of the Clinical Pharmacometrics subunit. She works at the intersection of research, clinical care and drug development, and is involved in the planning and analysis of clinical trials, therapeutic drug monitoring and antimicrobial stewardship activities, as well as local and international teaching.

Dr. Minichmayr is a co-editor of the journal Clinical Pharmacology and Therapeutics (CPT), a founding member and Deputy Chair of the Precision Dosing Community of the American Society of Clinical Pharmacology and Therapeutics (ASCPT), a board member of the International Society of Anti-Infective Pharmacology (ISAP), Deputy Head of the pharmacokinetic-pharmacodynamic (PK-PD) working group of the Paul Ehrlich Society, and Vice-Chair of the Pharmacometrics Committee of the International Association of Therapeutic Drug Monitoring and Clinical Toxicology (IATDMCT).

EDUCATION

Dr. Iris Minichmayr completed her Pharmacy studies at the University of Vienna, Austria, and became a licensed pharmacist in 2010. After several years of practical experience as a pharmacist, she pursued her doctorate at the Department of Clinical Pharmacy at Freie Universitaet Berlin, followed by four years of research and teaching in clinical pharmacometrics and pharmacy at Uppsala University, Sweden. Iris has completed multiple international clinical-pharmaceutical placements in Europe, Chile, and Australia. Since 2022, she has held a tenure-track position in Clinical Pharmacometrics at the Medical University of Vienna.

RESEARCH AREA

Dr. Minichmayr's research focuses on population pharmacokinetic-pharmacodynamic (PK-PD) modelling and simulation to optimise and individualise drug therapies, particularly for anti-infectives and special patient groups (e.g., intensive care patients, patients with organ dysfunction). Her projects encompass topics from target-site pharmacokinetics and translational predictions of antibiotic effects to therapeutic drug monitoring and model-based precision dosing.

Conflict of interest: None

Isabelle François

K1 – Opportunities and limitations of high-tech evolution

Affiliation MEDVIA

Country Belgium

CURRENT POSITION

Dr. Isabelle François is Director Innovation & Strategy at MEDVIA. MEDVIA is a not-for-profit public-private partnership that fosters health innovation in Flanders. MEDVIA does this by supporting R&D at the intersection of biotech, medtech and digital technologies, providing funding and support to tackle the challenges faced in launching health innovations on the global market. Dr. François is also chair of the external advisory board of the KU Leuven Digital Society Institute, co-chair of the health committee of XR Valley and strategic advisor of OKONO.

EDUCATION

Dr. Isabelle François obtained in 1997 the degree of bio-engineer in cell and gene biotechnology and she obtained in 2001 her PhD in Applied Biological Sciences. She performed scientific research in the field of antifungal medicines. Isabelle is (co-) author of more than 30 peer-reviewed international articles.

RESEARCH AREA

Dr. Isabelle François is specialized in healthcare innovations, such as medical devices, diagnostics, digital health applications, ATMP, robotics.

Conflict of interest: None

Jamie Hayes

W2 – Building a resilient pharmacy workforce and the importance of looking after ourselves – a necessity, not a luxury

Affiliation NHS Wales, Welsh Medicines Resource Centre

Country United Kingdom

CURRENT POSITION

Prof. Jamie Hayes is Director at the NHS Wales, Welsh Medicines Resource Centre and an Honorary Professor of Medicines Optimisation at Cardiff Metropolitan University. He is also a founder and director of JMH Collaborations Ltd, a boutique coaching, leadership and performance consultancy offering one-to-one and team coaching to executives, leaders and managers from organisations across private and public sectors.

EDUCATION

He trained at the Welsh School of Pharmacy, and qualified in 1992. His early career was as a clinical pharmacist at several hospitals in South Wales, with subsequent jobs taking him to New Zealand, North Wales and England before finally returning to South Wales, where he has been for the past fourteen years. In 2011 he obtained an MBA specialising in Lean Thinking. He qualified as an executive coach in 2016 He served as an elected board member for the Royal Pharmaceutical Society for six years, from 2016 to 2022, and was awarded Fellowship in 2021.

RESEARCH AREA

He is an experienced medical educator, with interests in patient and medicines safety, behavioral change, decision making and influencing skills.

Conflict of interest: None

Joan Vinent

[SIG – EAHP guidance on the pharmacy handling of in vivo gene therapy medicinal products]

Affiliation Pediatric Cancer Center Barcelona - Sant Joan de Déu Hospital

Country Spain

CURRENT POSITION

Joan Vinent is currently the head of the pediatric cancer pharmacy services of the Pediatric Cancer Center Barcelona (PCCB) as part of Hospital Sant Joan de Déu (SJD) Hospital. I am a consultant practitioner in pediatric haematology and solid tumour, BMT and advanced therapies. I am professionally and managerially responsible for the provision of pharmaceutical care to cancer services at the PCCB. I have overall responsibility for the safe and efficient provision of different anticancer therapies including cytotoxic chemotherapy, small molecule targeted therapies, monoclonal antibodies and ATMPs. I also contribute to policy and strategy development of pharmacy services at SJD Hospital.

EDUCATION

Joan Vinent studied Pharmacy at the University of Barcelona (UB) and became licensed pharmacist in 1997. In 2002, he completed the residency program at Bellvitge University Hospital (Barcelona) and became specialist hospital pharmacy. He holds a Master's Degree in Research and Development of Medicines (UB), a Diploma in Statistic in Human Sciences (Autonomous University of Barcelona) and several postgraduate courses. Joan has developed his professional career in different comprehensive cancer centers including the Catalan Institute for Oncology and Oxford University Hospitals before his current position. He Joan is board certified oncology pharmacy (BCOP) since 2005 and board certified pediatric pharmacist (BCPPS) since 2017 in the US.

RESEARCH AREA

Joan Vinent research focuses on pediatric oncology investigational drugs, ATMPs and therapeutic drug monitoring. He has participated as co-investigator in several academic clinical trials with competitive funding. He also has operational experience in all developmental phases of IP from clinical research to market access. He is member of the expert committee of the Spanish Ministry of Health for the evaluation of CART cell treatments.

Conflict of interest: None

Judith Thiesen

W1 – Aseptic handling in hospital pharmacies – challenges ahead

Affiliation Pharmacy Department of University Medical Center Mainz

Country Germany

CURRENT POSITION

Dr. Judith Thiesen is Deputy head of pharmacy at University Medical Center Mainz.

EDUCATION

Dr. Judith Thiesen studied pharmacy at Johannes Gutenberg-University Mainz and became licensed pharmacist in 1996. In 2021 she obtained a PhD for her work on optimization of administration of parenteral drugs in oncological patients.

RESEARCH AREA

Dr. Judith Thiesen's research focuses on physicochemical stability of cytotoxics, aseptic preparation and on fully automated aseptic preparation.

Conflict of interest: None

Jussi Tervonen

PC4 – Which clean room technologies? It depends!

Affiliation HUS Pharmacy

Country Finland

CURRENT POSITION

Mr. Jussi Tervonen is a hospital pharmacist at HUS Pharmacy in Helsinki. He is a development and validation specialist in multiple development projects including commissioning new hospital pharmacy premises and equipment, unit dose production process, ERP procurement and implementation and Boron nuclear capture therapy.

EDUCATION

Jussi Tervonen studied Pharmacy at the University of Eastern Finland graduating in 2004. In 2021 he obtained a specialist degree in Hospital and Health Centre Pharmacy. He has worked in pharmaceutical industry as QA director and QP, and has commissioned several radiopharmaceutical laboratories in multiple hospitals.

RESEARCH AREA

Jussi Tervonen specializes in unconventional and new pharmaceuticals and processes: radiopharmaceuticals, bacteriophage therapy, boron nuclear capture therapy, unit dose, automation of pharmaceutical processes.

Conflict of interest: None

Lara Wellens

SPD2 – Handling EU shortages approach

Affiliation FAMHP

Country Belgium

CURRENT POSITION

Lara Wellens was a pharmacist in various community pharmacies for thirteen years. Since 2021, she works at the FAMHP where she monitors the unavailability of medicines and helps develop measures to prevent or solve them.

EDUCATION

Lara Wellens studied pharmaceutical sciences at the Catholic University of Leuven and received her master's degree in 2008.

RESEARCH AREA

After having experienced the day to day problems that are accompanied with unavailabilities in the public pharmacy, Lara currently approaches the issue of unavailabilities at a higher level and helps in the search for solutions.

Conflict of interest: None

Laure Geslin

SPD2 – Handling EU shortages approach

Affiliation European Commission - DG SANTE

Country Belgium

CURRENT POSITION

Mrs. Laure Geslin is a Team Leader at the European Commission's Directorate-General for Health and Food Safety (DG SANTE). She coordinates the EU level policy developments related to the accessibility, affordability, and availability of medicines.

EDUCATION

Prior to this role, Laure served as Head of Division for Proper Use at the Belgian Federal Agency for Medicines and Health Products (FAMHP), where she chaired the Belgian Task Force for Medicines Shortages and represented the agency in the EMA/HMA Task Force on Availability of Authorised Medicines and the Belgian Pricing Committee for Pharmaceutical Products. She previously worked as Director of Tarification Services and Professional Development and Defense at Pharmacy, Brussels, and advocated for community pharmacists in Brussels.

Laure started her career as community pharmacist and holds a Master's degree in Pharmaceutical Science from the University of Ghent, Belgium.

Conflict of interest: None

Lena Frischlich

K2 – Navigating the challenges of disinformation in healthcare

Affiliation University of Southern Denmark (SDU)

Country Denmark

CURRENT POSITION

Dr. Lena Frischlich is an Associate Professor at and the Vice-Director of the Interdisciplinary Digital Democracy Centre at the University of Southern Denmark.

EDUCATION

Associate Prof. Dr. Frischlich studied psychology at the University of Cologne. She obtained her Diploma in Psychology in 2010. She completed her PhD in Social and Media Psychology at the same University in 2016. Between 2016 and 2017 she did her Postdoc in Digital Communication at the University of Muenster before starting her own junior research group "DemoRESILdigital: Democratic resilience in times of online propaganda, fake news, fear and hate speech" in 2018. From 2020-2021 and in 2023 she served as an interim Professor for Communication at the Ludwig-Maximilians University in Munich.

RESEARCH AREA

Associate Prof. Dr. Frischlich's research focuses on digital communication and the changing digital landscape. In particular, she studies how the digitization offers new opportunity structures for the staging of online propaganda and related phenomena (e.g., conspiracy narratives, disinformation, hate speech), leading to new effects of manipulation-oriented communication while, at the same time, the digitalisation also offers new possibilities for fostering democratic resilience. She studies these questions from an interdisciplinary and multi-methodological perspective, combining quantitative, qualitative, and computational measures.

Conflict of interest: None

Lorenz Van der Linden

Pharmacotherapy – anticoagulation therapy in hospitals: let's ask the experts

Affiliation University Hospitals Leuven (UZ Leuven) & KU Leuven

Country Belgium

CURRENT POSITION

Prof. L. Van der Linden is currently active as a hospital pharmacist in UZ Leuven (Belgium). There, he mostly focuses on improving patient outcome by focusing on high-risk patient groups (ie, geriatric people) and certain drug therapies (ie, mostly cardiovascular therapies). He gives lectures on these topics to Master students from multiple Faculties, supervises PhD research and also provided clinical pharmacy services himself at the emergency department.

EDUCATION

Prof. Van der Linden is a licensed hospital pharmacist (2006), who also completed a post-graduate course on clinical pharmacy (2008). He obtained his PhD on the rational use of drug therapies in older adults in 2018. He currently is an appointed professor at KU Leuven (10%) and hospital pharmacist at UZ Leuven (90%).

RESEARCH AREA

The central theme of his research explores the causal relationship between medication use in high-risk adults, particularly within geriatric medicine and cardiology, and key clinical outcomes such as (re)hospitalizations. His work investigates how clinical pharmacists can drive improvements in these outcomes by optimizing medication use.

Conflict of interest: None

Lucy Pollock*

W3 – Person-centered medication review in older people with comorbidities

Affiliation Somerset NHS Foundation Trust

Country United Kingdom

CURRENT POSITION

Dr. Lucy Pollock is a consultant geriatrician in Somerset, working with older people in both hospital and Hospital-at-Home settings. She has a particular interest in frailty, polypharmacy and patient-centered care. She has written two books – The Book About Getting Older, and The Golden Rule – using stories to explore the medical, ethical and social issues faced by older people and their families and healthcare teams.

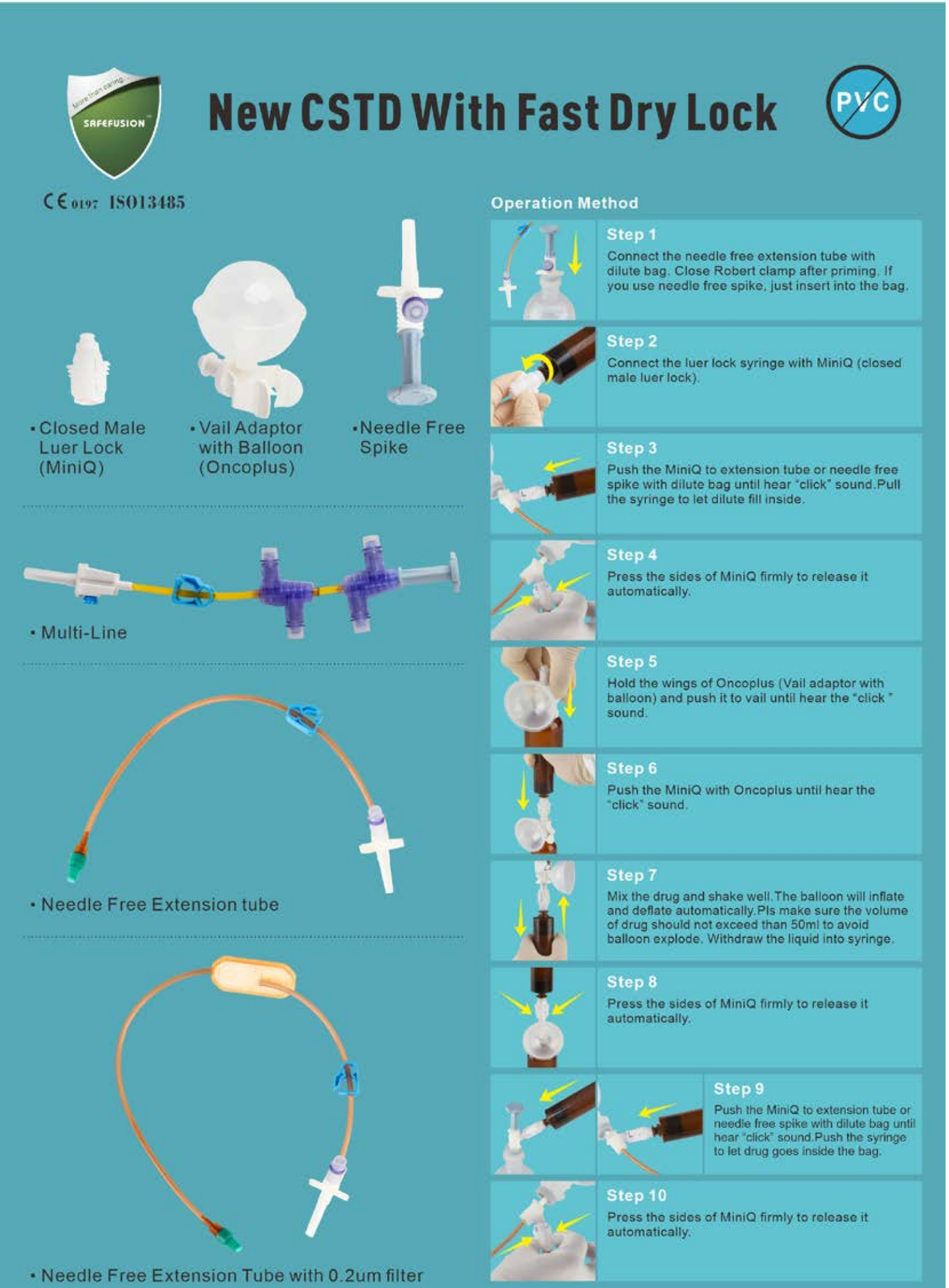
EDUCATION

Dr. Pollock studied medicine at Cambridge University and St Bartholomew's Hospital, London, qualifying in 1990. She trained in internal medicine and geriatric medicine in London before taking up a consultant post in Taunton in 2000.

RESEARCH AREA

Dr. Pollock's interests are in frailty and polypharmacy, and in sharing useful information with both healthcare professionals and the wider population. She contributed to the NICE guideline on hypertension in 2017, and to the new curriculum in geriatric medicine for Bristol University in 2019. She is co-author of an analysis of heart failure treatment for people with frailty published in the BMJ in November 2024.

Conflict of interest: Paid author of the books published by Penguin Random House



Marco Tuccori

ER1 – Hospital pharmacists driving evidence-based versus influencer-based medicine

Affiliation University of Verona, Department of Diagnostic and Public Health

Country Italy

CURRENT POSITION

Prof. Marco Tuccori started a new position of Associate Professor of Pharmacology at the Department of Diagnostic and Public Health at the University of Verona in November 2024. He is on of the coordinators of the Regional Centre of Pharmacovigilance and Pharmacoepidemiology of the Veneto Region.

EDUCATION

Prof. Marco Tuccori studied Pharmacy at the University of Pisa and graduated in 2001. In 2006 he achieved the specialization in Pharmacology and Medical Pathophysiology and in 2011 he obtained a PhD in Pharmacology at the University of Pisa. He also attended a post doc internship in Pharmacoepidemiology at McGill University in Montreal (Canada) in 2015. He had the position of Clinical Pharmacist ay the University Hospital of Pisa and was one of the coordinators of the Regional Pharmacovigilance Centre of Tuscany from 2009 to 2024. He is currently member of the working group of AIFA (Italian Drug Agency) for signal detection of drugs and vaccines.

RESEARCH AREA

Prof. Marco Tuccori's research focuses on main topics of Pharmacovigilance and particularly signal detection, clinical pharmacology of adverse drug reactions and drug utilization and drug safety studies using real world data (administrative healthcare databases). he recently started studying medicine safety communication.

Conflict of interest: None

Marina Maurer

W1 – Aseptic handling in hospital pharmacies – challenges ahead

Affiliation University Medical Center Groningen

Country The Netherlands

CURRENT POSITION

Dr. Marina Maurer is currently a hospital pharmacist at University Medical Center Groningen. She is head of the compounding department and specialized in aseptic handling and oncology pharmacy. Marina Maurer was also chair of the committee for compounding and pharmaceutical analysis of the Dutch Association of Hospital Pharmacists from 2022 to 2024.

EDUCATION

Marina Maurer studied Pharmacy at the University of Groningen and became a licensed pharmacist in 2003. She started her career as a hospital pharmacist at the compounding department of the University Medical Center Groningen in 2011. In 2017 she obtained her PhD on the formulation, potential application and evaluation of ColoPulse tablets in inflammatory bowel disease.

RESEARCH AREA

Marina Maurer currently focuses on leading the compounding department of the University Medical Center Groningen. This department has a manufacturing license for the production of ATMP's like CAR T-cells and fluorescent tracers used for (cancer) imaging.

Conflict of interest: None

Speakers' biographies

Martin J. Hug

SPD1 – New threats around procurement

Affiliation Medical Center – University of Freiburg

Country Germany

CURRENT POSITION

Prof. Dr. Martin J. Hug is chief pharmacist at the Medical Center and Professor at the Institute of Pharmaceutical Sciences – University of Freiburg, Germany. After appointments as assistant professor at the Institute of Physiology in Freiburg, the Department of Cell Biology and Physiology, University of Pittsburgh Medical Center and the Institut of Physiology II, University of Münster Martin Hug worked as head of laboratory at Aventis Pharma In 2013 he joined the staff of the hospital pharmacy in Freiburg. In 2015 he was elected into the Scientific advisory board of the German Federal Chamber of Pharmacists. Martin Hug is an active member of the German Society of Hospital Pharmacists and has been working on several aspects of medication safety.

EDUCATION

Prof. Dr. Hug received his training at the University of Freiburg, where he also received a Ph.D. degree in 1992. After years of conducting research studies in physiology and pharmacology he obtained a postdoctoral degree (habilitation) in 2013. In 2018 he was appointed Professor for Clinical Pharmacy at the Institute of Pharmaceutical Sciences – University of Freiburg, Germany.

RESEARCH AREA

Prof. Dr. Hug's research focuses on the investigation of electrolyte transport across biological membranes. He is also involved in a number of projects dealing with the measurement of serum levels of novel drugs. Recently Prof. Hug has been spent a substantial part of his time with the implementation of the Falsified Medicines Directive in Hospital pharmacies. He's currently actively involved in the evaluation of electronic patient information leaflets.

Conflict of interest: None

Mia Sivén

ER4 – Competency-based education – go for knowledge, skill and attitude!

Affiliation University of Helsinki

Country Finland

CURRENT POSITION

Associate Professor Mia Sivén acts as the Vice-Dean for Academic Affairs and Digitalisation at the Faculty of Pharmacy, University of Helsinki, and holds the Professorship of Sustainable Pharmacy.

EDUCATION

Associate Professor Mia Sivén obtained a PhD in biopharmacy at University of Helsinki in 2003. She is highly experienced researcher in the field of pharmaceutical sciences, being granted the Title of Docent in Industrial Pharmacy in 2020. She has been merited also as an educator and developer of higher education, having been awarded the esteemed Fellowship of the Teachers' Academy in University of Helsinki. She was appointed to the newly established Professorship of Sustainable Pharmacy in 2024.

RESEARCH AREA

Associate Professor Mia Sivén's research focuses on sustainable dosage forms and manufacturing, regulatory science, and educational research. In her research, she emphasises the importance of a comprehensive approach to sustainable pharmacy, encompassing sustainability perspectives throughout the life cycle of medicines, and the significance of transdisciplinary collaboration.

Conflict of interest: None

Michiel Duvyendak*

PSQ1 – Using technology for dispensing and administration: is it always safer?

Affiliation Antonius Hospital Sneek

Country The Netherlands

CURRENT POSITION

Dr. Michiel Duyvendak is currently hospital pharmacist in the Antonius Hospital in Sneek & Emmeloord. He is medical manager of the hospital pharmacy and director of the outpatient pharmacy. He is responsible for procurement and clinical trials and is Chief Pharmacy Informatics officer in the hospital. Furthermore, Dr. Duyvendak is the chairman of the national authorization committee of the Medication Process Information Standards and he is chairman of the Chipsoft software usergroup for medication and pharmacy. He is a member of the committee for specialized pharmaceutical care of the Dutch Society of Hospital pharmacists (NVZA) with special interest in digital transfer of medication information and reconciliation. For his work he received the 2010 Pharmacy Innovation Award and the 2017 GS1 Healthcare Award.

EDUCATION

Dr. Michiel Duyvendak studied pharmacy at the Royal University Groningen and became a licenced pharmacist in 2001. In 2007 he finished his specialization as a hospital pharmacist in the Medical Centre Leeuwarden en Tjongerschans Hospital Heerenveen. In 2010 he obtained a PhD in Pharmaceutical Science at the Royal University Groningen for his work on specialized pharmaceutical care in patients with musculoskeletal disease. For his educational performance he received the 2001 Royal Dutch Society of Pharmacy (KNMP) student prize, the 2001 Organon Young Research Talent Price and in 2007 the Opwijrda Prize and in 2010 the Sanofi Best Review Prize.

RESEARCH AREA

Dr. Michiel Duyvendak research focuses on medication safety, with special interest in (digital) medication information transfer, clinical decision support automation, (automated) medication review, technology assisted administration verification. Further research is conducted on antibiotic stewardship and allergy delabelling. Finally research is performed on glucorticosteroid induced osteoporosis.

Conflict of interest: Performs voluntary (no financial reward) user group work at Chipsoft.

Mieke Mertens

ER3 – Update on the clinical trial landscape

Affiliation Heidelberg University Hospital

Country Germany

CURRENT POSITION

Mieke Mertens is a hospital pharmacist at the Heidelberg University Hospital. She is responsible of clinical trials as well as preparation of sterile patient-specific investigational medicinal products. She is a member of the Clinical Trials Committee of the German Society of Hospital Pharmacists (ADKA). Besides that, she is focused in oncology and takes part in oncological ward rounds.

EDUCATION

Mieke Mertens studied Pharmacy at the Ludwig Maximilian University of Munich and became licensed pharmacist in 2009. She graduated as a specialist in clinical pharmacy at the University Hospital Heidelberg.

RESEARCH AREA

Mieke Mertens focuses in the implementation and execution of innovative clinical studies with Advanced Therapy Medicinal Products (ATMP) in the hospital pharmacy.

Conflict of interest: None

Speakers' biographies

Pascal Bonnabry

PC1 – Edutainment – using simulation for pharmaceutical technology training

Affiliation Geneva University Hospital

Country Switzerland

CURRENT POSITION

Prof. Pascal Bonnabry is currently Head of pharmacy at the Geneva university hospitals, in Switzerland. He is also Associate professor at the School of pharmaceutical sciences of the University of Geneva.

EDUCATION

Prof. Bonnabry studied at the Geneva university and obtained his pharmacy degree in 1992. He specialized in clinical pharmacology and obtained his PhD in 1996. Since 1996, he is active in hospital pharmacy. He has specialization in clinical pharmacology and hospital pharmacy.

RESEARCH AREA

Prof. Pascal Bonnabry's main research interests are in the field of risk management, evaluation of information technologies and new pedagogic approaches.

Conflict of interest: None

Patrick Koch*

SIG – Breaking Barriers: The EAHP SIG's Progress Toward Seamless Interoperability in Hospital Pharmacy Automation

Affiliation Peka Consulting, Founder and CEO

Country Belgium

CURRENT POSITION

Patrick Koch is a consultant specializing in the digital transformation of healthcare organizations, with extensive experience in healthcare IT, imaging IT, and pharmacy automation.

As the founder and managing director of Peka Consulting, Patrick provides strategic advisory services to healthcare organizations aiming to leverage technology to improve patient safety and operational excellence.

EDUCATION

With over 20+ years of experience in international business management for large multinational companies, Patrick has a proven track record of delivering innovative solutions to complex business challenges. He holds a Master's degree in Business Administration of Solvay Business School, Université Libre de Bruxelles, Belgium and has worked with a diverse range of healthcare clients across Europe.

RESEARCH AREA

Patrick is currently actively involved in the European Association of Hospital Pharmacists (EAHP) and leads its initiative its to advance interoperability in medication management. Patrick is dedicated to vendor-neutral solutions and fostering collaboration among stakeholders to drive innovation in the sector.

Patrick is also co-founder of The Asclepius Project, a pan-European group of hospital pharmacists dedicated to advancing closed-loop medication management in Europe. Additionally, he collaborates closely with PharmIA, a French start-up developing an AI-powered clinical decision support platform that assists hospital pharmacists in identifying and prioritizing medication-related risks, optimizing workflows, and enhancing patient safety.

Conflict of interest: Involved in the Advisory Group at PharmIA

Peter Almos

[Partner Session- Mental health, a matter for all: Perspectives on multi-stakeholders' collaboration]

Affiliation Standing Committee of European Doctors (CPME)

Country Hungary

CURRENT POSITION

Dr. Peter Almos is Vice president of the European Standing Committee of Doctors (CPME) and President of Hungarian Medical Chamber. As a specialist in psychiatry he is an associate professor at the Department of Psychiatry, University of Szeged, Hungary.

EDUCATION

Dr. Almos studied medicine at the University of Szeged, became specialist in psychiatry in 2010 and rehabilitation in 2016. In 2014 he obtained a PhD in clinical neuroscience. He was a postdoc researcher at the European Molecular Biology Laboratory and at the University of Würzburg. He was the head of Psychosis Unit and Emergency Outpatient Unit at the Department of Psychiatry, University of Szeged.

RESEARCH AREA

Dr. Almos carried out research on clinical genetics of impulse control, and cognitive neuroscience of addiction and suicide. Recently his research focuses on the mental health of physicians.

Conflict of interest: None

Reinoud Reynders

IG1 – Cyber-attack, systems down – pharmacy be prepared!

Affiliation UZ Leuven

Country Belgium

CURRENT POSITION

Reinoud Reynders is currently responsible for the IT infrastructure teams at the University Hospitals Leuven (Belgium). His teams are also responsible for cyber security and IT compliance. Reinoud Reynders works as Information Security Officer (ISO) at the same hospital.

EDUCATION

Reinoud Reynders studied Bio-Engineer at the University of Leuven. After spending two years as a researcher at the KU Leuven, he started working at the IT-department of the University Hospitals in Leuven (Belgium).

RESEARCH AREA

Mr. Reynders focuses on cyber security and IT infrastructure.

Conflict of interest: None

Roisin O'Hare

Partner Session: Mental health, a matter for all: Perspectives on Multistakeholder Collaboration

Young Professionals – A European perspective on hospital pharmacy training

Affiliation Craigavon Area Hospital, Southern Health and Social Care Trust, Northern Ireland

Country United Kingdom

CURRENT POSITION

Prof. Roisin O'Hare is currently the Northern Ireland (NI) Lead Clinical Education Pharmacist, responsible for experiential learning in hospital pharmacy for NI. She is based in Craigavon Hospital in the Southern Health and Social Care Trust and works across both Schools of Pharmacy in NI, Queens University Belfast, where she has recently been made a Professor, and Ulster University in Coleraine. The NI Clinical Education Team teaches around 1,000 undergraduate pharmacy students clinical pharmacy skills and the application of therapeutics to real patient scenarios in NI hospitals each year.

EDUCATION

Prof. O'Hare studied Pharmacy at the University of Strathclyde and has worked in hospital pharmacy in the field of Cardiology since registering as a pharmacist, now over 25 years ago. She gained her MSc in clinical pharmacy, she completed her Doctorate of Pharmacy Practice in 2014, with a focus on innovative educational methods to support the teaching and assessment of clinical pharmacy skills.

RESEARCH AREA

Prof. O'Hare was one of the first independent prescribers on the Pharmaceutical Society of Northern Ireland register and set up a pharmacist-led clinic to manage patients with pulmonary hypertension and later heart failure, winning NI Pharmacist of the Year 2007 for her work. She joined the NI Clinical Education Team as Team lead in 2008 and since then she has focussed on developing the clinical pharmacy workforce in NI via undergraduate experiential learning as well supporting the postgraduate education and training across NI. Through her work with clinical skills Prof O'Hare designed, piloted and evaluated the use of OSCEs in pharmacy in NI gaining her Doctorate for this research in 2014 and publishing her first book on the subject in 2017. More recently, she has been researching the use of Peer Teaching to support the teaching of undergraduate students during experiential learning as well as other methods of determining student competence with clinical skills, including Entrustable Professional Activities.

Conflict of interest: None

Sebastian Wicha

CPS1 – Precision in practice: advancing patient care with model-informed precision dosing

Affiliation University of Hamburg, Institute of Pharmacy

Country Germany

CURRENT POSITION

Prof. Dr. Sebastian Wicha is currently a Professor of Clinical Pharmacy at the Institute of Pharmacy, University of Hamburg, Germany. He is leading the research group "Clinical Pharmacy" supervising 10 PhD students.

EDUCATION

Prof. Dr. Wicha studied Pharmacy at the University of Freiburg, Germany. He became a licensed pharmacist in 2011. In 2015 he obtained a PhD in Clinical Pharmacy from the Freie Universität Berlin, Germany. Thereafter, he pursued a Postdoc at the Pharmacometrics Research Group at Uppsala, University, Sweden.

RESEARCH AREA

Prof. Dr. Wicha's research deals with the dose optimisation of medicines using pharmacokinetic-pharmacodyamic principles mainly focusing on anti-infectives and anti-cancer drugs.

Conflict of interest: None

Simon Hall

Synergy Satellite – Pitch Perfect: Healthcare Presentation Skills

Affiliation University of Cambridge

Country United Kingdom

CURRENT POSITION

Simon Hall created and leads an award winning course in public speaking, storytelling and writing skills at the University of Cambridge, and runs his own business communication agency, Creative Warehouse. He has 20 books published, ranging from business and communication to crime fiction. The most recent, Compelling Communication (Cambridge University Press, 2024) accompanies his university course. Previously, Simon was a BBC Television, Radio and Online News Correspondent for 20 years. You might be interested to know that Simon also once played football for the same manager who coached the legendary Pele, although to rather less impressive effect.

EDUCATION

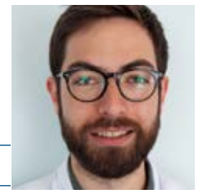
Simon has a degree in physics, math and chemistry.

RESEARCH AREA

Communication skills.

Conflict of interest: None

Simon Rodier



PC1 – Edutainment – using simulation for pharmaceutical technology training

Affiliation Centre Hospitalier Universitaire de Poitiers

Country France

CURRENT POSITION

Dr. Simon Rodier is currently a hospital pharmacist at Centre Hospitalier Universitaire de Poitiers. He is particularly in charge of quality insurance.

EDUCATION

Dr. Rodier studied Pharmacy at the University of Poitiers and Caen Normandie (pharmacy residency) and graduated in 2018. In 2021 he obtained a PhD in pharmacy at Caen Normandie Université for his work on healthcare professionals' exposure and risk of contamination to antineoplastic drugs during hyperthermic intraperitoneal chemotherapy.

RESEARCH AREA

Dr. Rodier's research focuses on risk assessment and healthcare simulation in all fields of pharmacy and drug management.

Conflict of interest: None

Sotiris Tsiafos-Tsiaras

INT1 – The European landscape on hospital pharmacy logistics

Affiliation 401 General Army Hospital of Athens

Country Greece

CURRENT POSITION

Mr. Sotiris Tsiafos-Tsiaras is currently the Director of the Pharmacy Department at 401 General Army Hospital of Athens. He oversees and coordinates all department operations, with a specialization in healthcare supply chain management and the implementation of global supply chain standards in healthcare.

EDUCATION

Mr. Sotiris Tsiafos-Tsiaras studied Pharmacy at the Aristotle University of Thessaloniki and became a licensed pharmacist in 1997. In 2010, he obtained an MSc in Logistics and Supply Chain Management from the Department of Industrial Management & Technology at Piraeus University.

RESEARCH AREA

Mr. Sotiris Tsiafos-Tsiaras blends pharmaceutical expertise with advanced logistics know-how. Specializing in healthcare supply chain management, he focuses on implementing global supply chain standards and barcode technology to streamline operations in hospitals and enhance patient safety. His work ensures that critical medical supplies are managed efficiently, reflecting a deep commitment to innovation and excellence in healthcare delivery.

Conflict of interest: None

Suzanne McCarthy

ER1 – Hospital pharmacists driving evidence-based versus influencer-based medicine

Affiliation University College Cork, School of Pharmacy

Country Ireland

CURRENT POSITION

Dr. Suzanne McCarthy is currently a Senior Lecturer in Clinical Pharmacy at the School of Pharmacy, University College Cork.

EDUCATION

Dr. McCarthy studied pharmacy at the Robert Gordon University in Aberdeen, Scotland and became a licensed pharmacist in 2004. In 2009, she obtained a PhD in pharmacoepidemiology at the University of London. She has postgraduate qualifications in clinical pharmacy, statistics and medical education.

RESEARCH AREA

Dr. McCarthy's research focuses on medication safety, pharmacovigilance and human factors, across various clinical areas, including paediatrics and mental health. Her work emphasizes improving patient outcomes through safer medication practices, with a strong focus on understanding and enhancing the patient experience. By integrating patient perspectives into her research, she aims to ensure that safety interventions are both patient-centered and practical in real-world clinical settings.

Conflict of interest: None

Thomas Storme

PC4 – Which clean room technologies? It depends!

Affiliation Hôpital Universitaire Robert Debré
AP-HP.Nord / Assistance Publique - Hôpitaux de Paris

Country France

CURRENT POSITION

Dr. Thomas Storme is currently a hospital pharmacist at the Hôpital universitaire Robert Debré, in Paris, France. He is responsible for pharmaceutical compounding in this paediatric hospital. Dr. Storme is also a member of the Scientific Committee and of the Board of the European Society of Hospital Pharmaceutical Technologies (GERPAC-ESHPT).

EDUCATION

Dr. Thomas Storme studied Pharmacy at the Université Paris-Descartes, France and became licensed pharmacist in 2006. In 2007, he obtained a PhD in medicinal chemistry at the same university for his work on the conception, synthesis and evaluation of new ifosfamide analogues designed to lower neurotoxic and nephrotoxic side-effects. After this academic work focused on medicinal chemistry and cancer care, Dr. Storme turned to hospital pharmacy in a Parisian paediatric hospital specialized in pharmaceutical technologies. As an external expert, he took part in the drafting of Good Compounding Practices published in 2022 by the French Drug Agency (ANSM).

RESEARCH AREA

Dr. Thomas Storme professional activity focuses on hospital drug production (sterile, especially personalised parenteral nutrition, and oral paediatric formulations (capsules, oral liquids). He is particularly interested in design and conception of production areas and utilities, in order to comply with applicable requirements. His priority is to keep it as simple and smart as possible for all users (physicians, nurses, pharmacy technicians, maintenance technicians, and of course, patients).

Conflict of interest: None

Thomas Whitelaw

K3 - Digital health – patient experiences and expectations

Affiliation Health and Social Care Alliance Scotland

Country United Kingdom

CURRENT POSITION

For five years Tommy Whitelaw was a full-time carer for his late mother Joan who had Vascular Dementia. In 2011 Tommy undertook a walk around Scotland's towns and cities to collect hundreds of life stories and letters detailing the experiences of individuals who care for a loved one living with dementia. Tommy took this collection of stories to the Scottish Parliament to raise awareness of the value of carers, providing a platform for people to share their experiences and highlight what is needed to better support carers in Scotland.

Since then, he has engaged with thousands of carers through his 'Tommy on Tour' blog and as National Lead for the ALLIANCE's Person Centred Voices Project. In this role he delivers frequent talks to health and social care professionals, students and carer organisations across the UK ,Europe and North America promoting the values and principles of 'What Matters to You?', 'Intelligent Kindness' and 'Civility Saves Lives' – movements that identify active listening, kindness, and person centeredness as key to providing inclusive support and care to all individuals, as well as healthy work environments.

This outreach programme has now reached over 280,000+ people across 2,300+ talks, gathering 30,000 'What Matters to You' pledges, capturing people's commitments to putting this work into practice for the benefit of individuals and families.

In 2014, 2019 and again in 2023 Tommy produced Concerts for Caring. Each concert, held at Glasgow's Royal Concert Hall saw over 1,850 individuals join for an evening of music, celebration and respite.

Conflict of interest: None

Venetia Simchowitz*

PC2 – Navigating paediatric therapeutics: challenges in medicines and parenteral nutrition

Affiliation Great Ormond Street Hospital for Children, NHS Foundation Trust

Country United Kingdom

CURRENT POSITION

Venetia Simchowitz is currently the Consultant Pharmacist for Clinical Nutrition at Great Ormond Street Hospital for Children NHS Foundation Trust and has been employed at the trust since 2002. She leads a team of pharmacists providing pharmaceutical care and parenteral nutrition within the trust and to patients at home. She represents paediatric pharmacy in a number of groups within the NHS, including the National HPN stakeholders group where she is vice chair. and the NHS England Clinical Advice and Management Group and has been involved in developing national guidance statements on clinical care and shortages. She is vice chair for the British Pharmaceutical Nutrition Group (BPNG) and a member of PANG (Paediatric & Neonatal gastroenterology) specialist interest group of NPPG (Neonatal and Paediatric Pharmacy group).

EDUCATION

She obtained her pharmacy degree from the University of Brighton in 1996 and became a qualified pharmacist in 1997. She completed her post graduate diploma in Pharmacy practice at the University of Brighton in 2004, qualified as an independent prescriber for Paediatric Parenteral Nutrition in Sept 2007 and undertook a Master of Science degree in Critical Care at Cardiff University in 2013.

RESEARCH AREA

Her research focuses on nutrition in neonates and intensive care. She is a passionate advocate for nutritional care for neonates and paediatric and was the sole paediatric pharmacist for the ESPGHAN/ESPEN/ESPR working party providing evidence-based guidelines for Paediatric Parenteral Nutrition (publication 2005, 2018).

Conflict of interest: Served at Baxter Advisory Board

Victoria Östman

INT2 – The patient in charge of the discharge

Affiliation Uppsala University Hospital

Country Sweden

CURRENT POSITION

Ms. Östman is a PhD-student and the overall project coordinator for the IMPACT-care intervention study. Ms. Östman is also a clinical pharmacist specializing in surgical patients.

EDUCATION

Ms. Östman studied Pharmacy at Uppsala University and became a licensed pharmacist in 2023. Since graduation she has been working as a clinical pharmacist, specializing in surgical patients. In 2024 she was accepted as a PhD-student in pharmacotherapy at Uppsala University.

RESEARCH AREA

Ms. Östman is a PhD-student within the IMPACT-care project. The research focuses on elderly patients discharge process, especially medication information and patient involvement.

Conflict of interest: None

Vitória Cunha

PC3 – Hospital @ Home

Affiliation Garcia de Orta Hospital, Home Hospitalization Unit

Country Portugal

CURRENT POSITION

Dr. Vitória Cunha is an Internal Medicine Specialist, currently the Medical Coordinator of the Home Specialization Unit in Garcia de Orta hospital – the first home hospitalization unit in Portugal. Dr. Vitória Cunha is also a member of the coordination of the Home Hospitalization Nucleus of the Portuguese Society of Internal Medicine.

EDUCATION

She obtained Integrated Master in Medicine by the Medical Sciences Faculty of the New University of Lisbon in 2008.

RESEARCH AREA

Her research is mainly focused on Home Hospitalization and Hypertension.

Conflict of interest: None

Yoana Nuevo

ER2 – The second life of drugs: opportunities and challenges of drug repurposing

Affiliation Spanish Agency of Medicines and Medical Devices (AEMPS), Department of Medicines for Human Use

Country Spain

CURRENT POSITION

Dr. Yoana Nuevo-Ordóñez is the head of the Innovation office and National Scientific Advice Unit within the Spanish Agency of Medicines and Medical Devices (AEMPS). Dr Yoana is also the Spanish representative of the European Innovation Network (EU-IN), composed by the National Competent Authorities' Innovation offices plus the Innovation Task Force (ITF) from EMA. She also leads the theme "Regulatory Science, Innovation and Competitiveness" of the European Medicines Agencies Network Strategy (EMANS) for 2028 and the INNO Group (composed by the EU-IN, SAWP, CTCG and HTA) together with Maria Jesus Lamas (AEMPS Executive Director).

EDUCATION

Dr. Yoana Nuevo-Ordóñez studied Chemistry at the University of Oviedo, Spain obtaining her degree in 2005. In 2011 she obtained an European PhD in Analytical Chemistry at the University of Oviedo in collaboration with the University of Aberdeen, Scotland. After doing her post doctorate at the National Institute of Standards and Technology (NIST), USA, she worked 5 years at a Biopharmeceutical company in Spain as head of the quality control department. In 2018 she joined the Spanish Agency (AEMPS) as responsible of the Innovation Office and in 2022 she got a permanent position and was named head of the Innovation Office and National Scientific Advice Unit.

RESEARCH AREA

Dr. Yoana Nuevo-Ordóñez is responsible for the coordination of the AEMPS Innovation Office and National Scientific Advice Unit. She is also in charge of all the activities related with innovation within the Spanish Agency. As a member of the EU-IN is co leading numerous European projects. She leaded together with the EU-IN partners the STARS "Strengthening Training of Academia in Regulatory Science" project funded by the European Commission and now they are implementing the recommendations. She is co leading with the Czech Republic Agency (SUKL) the Horizon Scanning report on nanomedicines, she is co leading together with the Paul Ehrlich institute (PEI) and the federal agency for medicines and health products (FAMHP) in Belgium the Simultaneous National Scientific Advice (SNSA) Pilot and she is also co leading with EMA the European Repurposing project Pilot.

Conflict of interest:None

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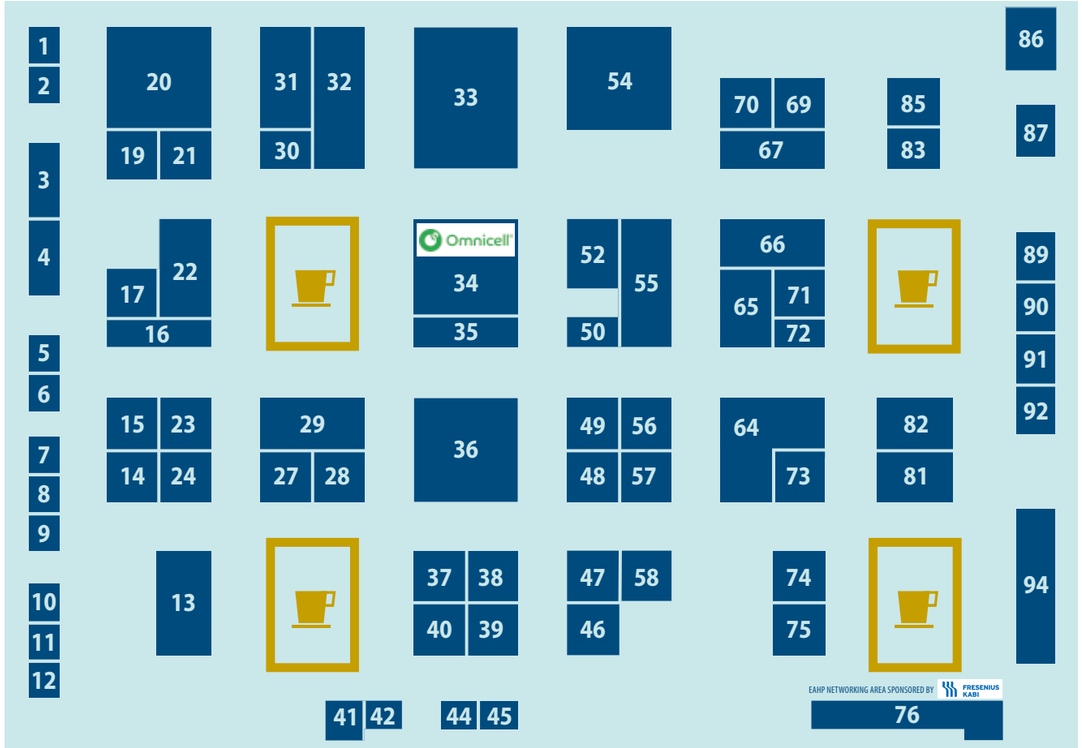
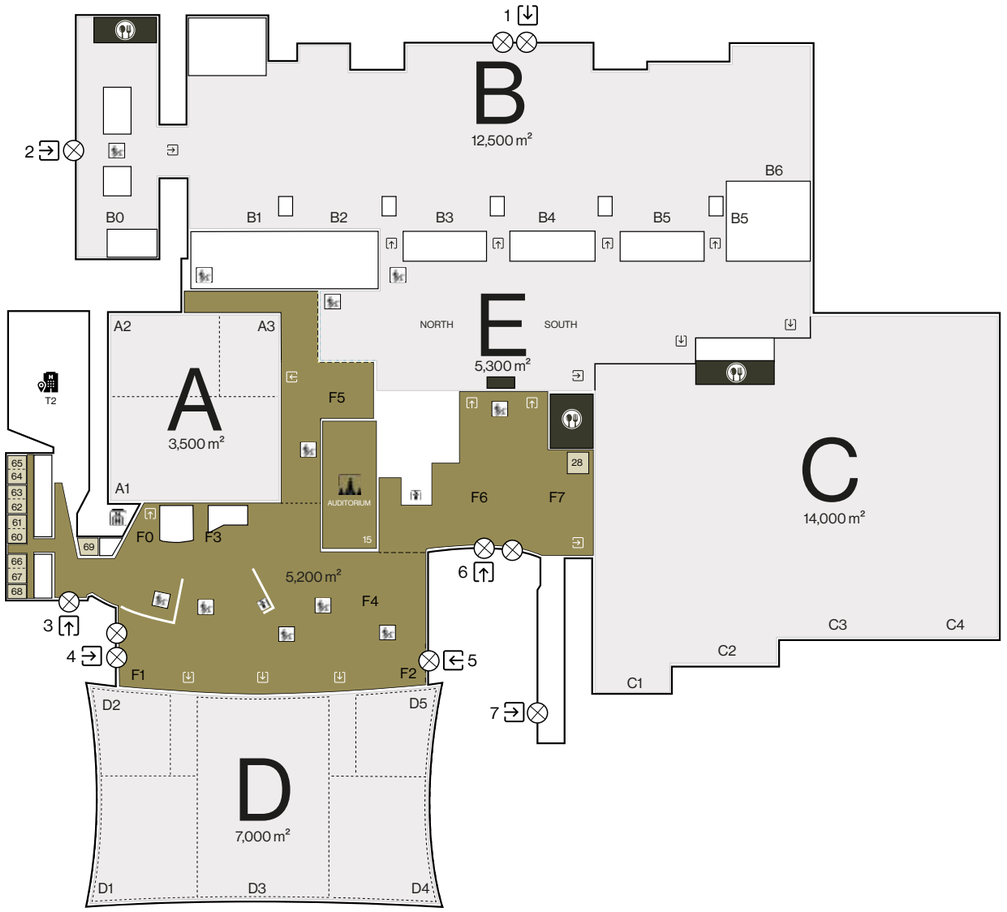
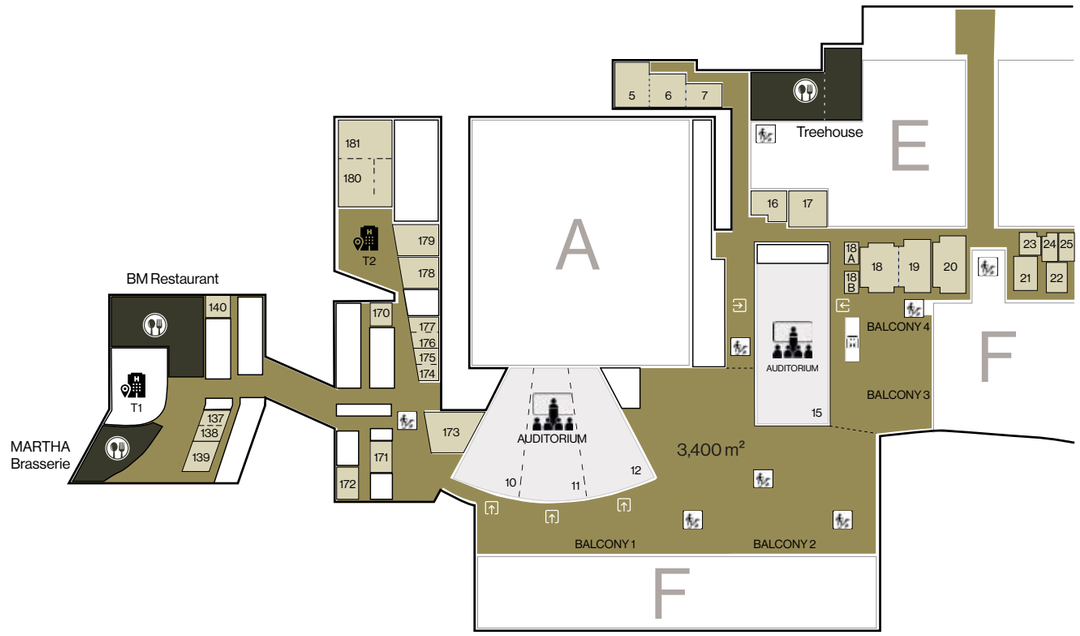
EXHIBITOR'S MAP



VENUE PLAN
GROUND FLOOR



VENUE PLAN
1ST FLOOR



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